GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO: Ma	atthew Rhoten, C	County Manager						
FROM:	HLT	Health						
	Dept. Code	Department N	ame					
	Bri	ittain Kenney	05/27/2025					
	Departn	nent Director	Date					
REQUEST TYPE:								
Line-Item Transfer	Within Departm	ent & Fund	Line-Item Transfer Be	tween Funds*				
Project Transfer W	/ithin Departmen	t & Fund	Additional Appropriation	on of Funds*				
Line-Item Transfer	Between Depar	tments	* Requires resolution by the	e Board of Commissioners				
ACCOUNT DESCRIPTION As it appears in Munis		ACCOUNT I	NUMBER	AMOUNT**				
	4 3 Fund Dept	3 5 6 Div SubDiv Prog	7 4 2 6 5 SubProg Future Func Obj Proj					
Ex. Employee Training	Ex. 1000		xxxxxx xx xxxx xxxxxxxxxxxxxxxxxxxxxxx	Ex. \$5,000.00 Ex. (\$5,000.00)				
Fund Balance Appropriated	2055-NDP-000	2055-NDP-000-0000-FBApro-0000000-0000-99-490000-						
Salaries	2055-HLT-000-	2055-HLT-000-00000-CSPIng-Stratg1-0000-05-510001-						
FICA	2055-HLT-000-	-00000-CSPIng-Stratg1	-0000-05-510100-	10,858.00				
Retirement	2055-HLT-000-	-00000-CSPIng-Stratg1-	-0000-05-510101-	19,302.00				
401K Contribution	2055-HLT-000-	-00000-CSPIng-Stratg1-	-0000-05-510102-	7,097.00				
Health Insurance	2055-HLT-000-	-00000-CSPIng-Stratg1-	-0000-05-510103-	18,600.00				
Dental Insurance	2055-HLT-000-	-00000-CSPIng-Stratg1-	-0000-05-510104-	465.00				
Life Insurance	2055-HLT-000-	-00000-CSPIng-Stratg1-	-0000-05-510105-	310.00				
Program Supplies	2055-HLT-000-	-00000-CSPIng-Stratg1-	-0000-05-520002-	1,000.00				
Food and Provisions	2055-HLT-000-	-00000-CSPIng-Stratg1-	-0000-05-520005-	4,000.00				
Employee Training	2055-HLT-000-	-00000-CSPIng-Stratg1-	-0000-05-520011-	6,000.00				

JUSTIFICATION FOR REQUEST:

Gaston County joined the State in the National Opioid Settlement. This BCR appropriates Year 1 \$214,514.00 Total Project \$429,028.00 of our allotment for a Collaborative Strategic Planning program and operating costs. The program will monitor outcomes and impact of funded and recommended programs and conduct ongoing assessment of data related to current and emerging community needs. In addition, the program will maintain a dashboard to ensure accountability and transparency with use of the opioid settlement funds. Year 1 (July 1, 2025 - June 30, 2026): \$214,514.00

^{**} Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.

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ACCOUNT DESCRIPTION As it appears in Munis		ACCOUNT NUMBER								AMOUNT^	
	4	3	3	5	6	7	4	2	6	5	Ex. \$5,000.00
	Fund	Dept XXX	Div	SubDiv	Prog	SubProg	Future	Func	Obj	Proj	Σχ. ψο,σσσ.σσ
Ex. Employee Training	Ex.	1000-E	3GT-00	0-0000	0-0000	000-000	0000-0	000-0	1-52001	11-	
Printing	2055-HLT-000-00000-CSPIng-Stratg1-0000-05-520013-										100
Postage	2055-HLT-000-00000-CSPIng-Stratg1-0000-05-520014-										50
Software Rental	2055-HLT-000-00000-CSPIng-Stratg1-0000-05-530029-								4,800		

[^] Decreases in expenditures & increases in revenue accounts require brackets. Increases in expenditures & decreases in revenue do not require brackets. Please note that transfers between funds require interfund transfer accounts.