

GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO: _____ Dr. Kim S. Eagle _____ COUNTY MANAGER

FROM: _____ DSS _____ Social Services _____
 Dept. Code Department Name

_____ Angela Karchmer _____ 9/13/23
 Department Director Date

REQUEST TYPE:

- | | |
|---|---|
| <input type="checkbox"/> Line-Item Transfer Within Department & Fund
<input type="checkbox"/> Project Transfer Within Department & Fund
<input type="checkbox"/> Line-Item Transfer Between Departments | <input type="checkbox"/> Line-Item Transfer Between Funds*
<input checked="" type="checkbox"/> Additional Appropriation of Funds*
<p style="text-align: right; font-size: small;">* Requires resolution by the Board of Commissioners</p> |
|---|---|

ACCOUNT DESCRIPTION	ACCOUNT NUMBER	AMOUNT**																														
As it appears in Munis	<table><tr><td>4</td><td>3</td><td>3</td><td>5</td><td>6</td><td>7</td><td>4</td><td>2</td><td>6</td><td>5</td></tr><tr><td>Fund</td><td>Dept</td><td>Div</td><td>SubDiv</td><td>Prog</td><td>SubProg</td><td>Future</td><td>Func</td><td>Obj</td><td>Proj</td></tr><tr><td>XXXX</td><td>XXX</td><td>XXX</td><td>XXXXX</td><td>XXXXXX</td><td>XXXXXX</td><td>XXXX</td><td>XX</td><td>XXXXXX</td><td>XXXXX</td></tr></table>	4	3	3	5	6	7	4	2	6	5	Fund	Dept	Div	SubDiv	Prog	SubProg	Future	Func	Obj	Proj	XXXX	XXX	XXX	XXXXX	XXXXXX	XXXXXX	XXXX	XX	XXXXXX	XXXXX	Whole dollars only
4	3	3	5	6	7	4	2	6	5																							
Fund	Dept	Div	SubDiv	Prog	SubProg	Future	Func	Obj	Proj																							
XXXX	XXX	XXX	XXXXX	XXXXXX	XXXXXX	XXXX	XX	XXXXXX	XXXXX																							
Ex. Employee Training	Ex. 1000-BGT-000-00000-0000000-0000000-0000-01-520011-	Ex. \$5,000 Ex. (\$5,000)																														
Food Stamp Administration	1000-DSS-270-00000-FNSvcs-000000-0000-05-410000-S0015	(45,693)																														
Temporary Help Services	1000-DSS-270-00000-000000-0000000-0000-05-530013-	45,693																														

JUSTIFICATION FOR REQUEST:

The American Rescue Plan Act of 2021 provides additional funds for SNAP administrative expenses to assist State agencies in carrying out legislative provisions and administering SNAP. North Carolina DHHS is allocating funds to counties to support the county's efforts of administering the FNS program due to the workload increases that counties are experiencing as a result of increased food insecurity due to the pandemic. DHHS will allocate county amounts based on FNS caseloads and these allocation amounts are attached. The additional federal funds for administration frees up county funds that is recommended to be used to enhance the Supplemental Nutrition Assistance Program.

** 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.