	GA	STON COUNT	Y BUDGET CHA	ANGE REQUEST		
TO:	Dr. Kim S. Eagle		COUNTY MANAGER			
FROM:	4110	10 Commissioners				
-	Dept. # Department N		nt Name	_		
Department Director's Name			Date	_		
TYPE OF REQUES	ST:					
Line Item Transfer Within Department & Fund				Line Item Transfer Between Funds *		
Project Tra	ınsfer Within Departn	nent & Fund	X	Additional Appropriation of	of Funds *	
Line Item 1	ransfer Between De <sub>l</sub>	partments*		* Requires resolution by the	e Board of Commissioners	
			ACCOUNT	NUMBER	AMOUNT	
ACCOUNT DESCRIPTION			Fund - Function - Dept - Division - Object - Project		Whole Dollars Only	
(As it appears in the budget)		)	XXX - XX - XXXX - XXXX - XXXXX - XXXXXX		(See Note Below)	
Fund Balance Appropriated		010-99	-9900-0000-490000		(100,000)	
Professional Services		010-01	-4110-0000-530010		100,000	
ILICTIFICATION F	OD DEOUEST.					
JUSTIFICATION F		ard Sweeney & S	tenhenson IIP to F	Provide Legal Represer	ntation to the Gaston	
County Board of	Commissioners i Recent Article Pu	n Connection With blished by the Ga	h Litigating an Actic eston Gazette (Fund	on for Defamation (Libe		
Note: Decreases i	in evnenditures &	increases in reve	nue accounts require	hrackete Increases in	evnenditures & decreases in	

revenue do not require brackets. Please note that transfers between funds require interfund transfer accounts.