	GA	STON CO	UNTY BUDGET (CHANGE REQUEST	-
TO:	Earl Mathers		cou	NTY MANAGER	
FROM:	5114	DHHS	- Public Health		
11101111	Dept. # Department Name		artment Name		
Department Director's Nam		ctor's Name	e Date		
TYPE OF REQUE	ST:				
Line Item Transfer Within Department & Fund Line Item Transfer Between Funds *					
Project Transfer Within Department & Fund X Additional Appropriation of Funds *					
Line Item	Transfer Between Do	epartments*		* Requires resolution by	the Board of Commissioners
			ACCOL	INT NUMBER	AMOUNT
ACCOUNT DESCRIPTION		N	Fund - Function - Dept - Division - Object - Project		Whole Dollars Only
(As it appears in the budget)		et)	xxx - xx - xxxx - xxxx - xxxxx - xxxxxx		(See Note Below)
Health State Gra			011-05-5114-5125-42 011-05-5114-5125-56		(\$2,000) \$2,000
JUSTIFICATION I	FOR REQUEST:				

The Gaston County Department of Health and Human Services – Public Health Division received additional State Grant funds from the NC Division of Public Health for the Environmental Health Program. Gaston County Environmental Health division was selected to begin basic vector surveillance, education, and suppression efforts with the goal of developing Integrated Mosquito and Tick Management programs for the future. These funds will help the department to remain prepared for the continuing threat of mosquito and tick-borne diseases in North Carolina. The funds will be used to purchase traps and supplies to identify the type of mosquito and for training to gain the skills needed to perform basic mosquito surveillance. These are Non-County funds.

Note: 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.