GASTON COUNTY BUDGET CHANGE REQUEST (BCR)			
то:	Dr. Kim S. Eagle COUNTY MANAGER		R
FROM:		EMS	
	ept. Code Departme	ent Name	
	Mark Lamphiear	3/6/23	
	Department Director	Date	
REQUEST TYPE:	Within Department & Fund	Line-Item Transfer Betwe	en Funds*
Project Transfer Within Department & Fund Additional Appropriation of Funds*			
Line-Item Transfer Between Departments * Requires resolution by the Board of Commissioners			
ACCOUNT DESCRIPTION	ACCOU	INT NUMBER	AMOUNT**
As it appears in Munis	4 3 3 5 Fund Dept Div SubDiv	6 7 4 2 6 5 Prog SubProg Future Func Obj Proj	Whole dollars only
Ex. Employee Training	XXXX XXX XXXX XXXXX X	-000000-0000000-0000-01-520011-	Ex. \$5,000 Ex. (\$5,000)
FedGrtRev: SMAT III / Nat'l Bi	1000-EMS-000-00000-000000-000000-0000-02-410000-G0072		(\$7,354.50)
F/E<\$5K: SMAT III / Nat'l Biot	1000-EMS-000-00000-000000-00	000000-0000-02-520020-G0072	\$7,354.50
JUSTIFICATION FOR REQUEST:			

Gaston County Emergency Medical Services received Grant funds from The Charlotte-Mecklenburg Hospital Authority d/b/a Atrium Health from NCOEMS. The funds will be used to purchase cots. These are Non-County funds.

** 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.