

GASTON COUNTY BUDGET CHANGE REQUEST	
TO:	Earl Mathers
	COUNTY MANAGER
FROM:	5100 DHHS - Public Health
	Dept. # Department Name
	Department Director's Signature Date

<input type="checkbox"/>	Line Item Transfer Within Department & Fund	<input type="checkbox"/>	Line Item Transfer Between Funds *
<input type="checkbox"/>	Project Transfer Within Department & Fund	<input checked="" type="checkbox"/>	Additional Appropriation of Funds *
<input type="checkbox"/>	Line Item Transfer Between Departments*	<u>* Requires resolution by the Board of Commissioners</u>	
		Resolution #	Date

ACCOUNT DESCRIPTION (As it appears in the budget)	ACCOUNT NUMBER Fund - Dept - Subdept - Div - Acct - Subacct xx - xxxx - xxxx - xxxx - xxx - xxx	PROJECT SUBPROJECT xxxxx - xxxx	AMOUNT Whole Dollars Only (See Note Below)
Medicaid Max Reserve	11-2900-23		(\$130,000)
Special Programs	11-5100-5111-298-000	16279-0001	\$130,000

The Gaston County Department of Health and Human Services – Public Health Division received funds for the Medicaid Cost Settlement audit. These funds are required in the NC State Consolidated Agreement and Medicaid guidelines to be utilized in the area in which they were earned. These funds are needed for the Hudson facility clinical and patient area renovation project. These are non-County funds.

County Manager/Assistant County Manager	Date	Interim Financial Services Director	Date
		Assistant Finance Director	Date

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.