GASTON COUNTY BUDGET CHANGE REQUEST								
TO:	Earl Mathers			COUNTY MANAGER				
FROM:	5114	DHHS	- Public Health					
	Dept. # Department Name							
i	Department Director's Name			Date				
TYPE OF REQUE	ST:							
Line Item Transfer Within Department & Fund					Line Item Transfer E	Between Funds *		
Project Transfer Within Department & Fund X Additional Appropriation of Funds *								
Line Item Transfer Between Departments* <u>* Requires resolution by the Board of Commissioner</u>							<u>nissioners</u>	
			A	CCOUNT N	UMBER	AM	MOUNT	
ACCOUNT DESCRIPTION			Fund - Function - Dept - Division - Object - Project			Whole	Dollars Only	
(As it appears in the budget)			xxx - xx - xxxx - xxxx - xxxxx - xxxxxx			(See N	Note Below)	
Health State Grant			011-05-5114-5125-425059-18148				(\$21,595)	
FY18 State Food/Lodging Inspections			011-05-5114-5125-560000-18148				\$21,595	

## JUSTIFICATION 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 completed 100% of their Food Establishment and Restaurant inspections for the FY 17 year and the NC Division of Public Health grants additional funds for counties who complete 100% of their food facility inspections. The additional funds will be used for Environmental Health supplies, materials, and training. 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.