GASTON COUNTY BUDGET CHANGE REQUEST					
TO: Earl Mathe	arl Mathers CC		IANAGER		
FROM: 4372	Rescue Squads				
Dept. #	Department Name				
Mark A. Lamphiear					
Department Director's Signature Date					
TYPE OF REQUEST:					
Line Item Transfer Within Department & Fund		Li	ne Item Transfer Between I	Funds *	
Project Transfer Within Department & Fund		XA	X Additional Appropriation of Funds *		
Line Item Transfer Between Departments* <u>* Requires resolution by the Board of Commissioners</u>					
		Resolution	ion # Date		
	ACCOUNT NUM	BER	PROJECT	AMOUNT	
ACCOUNT DESCRIPTION Fund - Dept - Subdept - Div - Ac		cct - Subacct	SUBPROJECT	Whole Dollars Only	
(As it appears in the budget)	xx - xxxx - xxxx - xxxx - xxx - xxx		xxxxx - xxxx	(See Note Below)	
Fund Balance	-			(\$ 200,000)	
Rescue Squad Supplements Insurance	010-02-4372-0000-530040 010-02-4372-0000-530024			\$ 128,000 \$ 72,000	
JUSTIFICATION FOR REQUEST: Additional funds are needed for FY18 Rescue Squad reimbursement. For several years, we have been working with the four Rescue Squads to update their contracts to provide additional reimbursement for transports, reduce reimbursement for dual response, and improve accountability for citizens. All four Squads have now signed the new contract. The increased reimbursement for transports, although partially offset by decreased reimbursement for dual response, has resulted in predicted but higher, unbudgeted reimbursement costs. Further, increased call taking by Squads has also resulted in higher, unbudgeted reimbursement costs.					
APPROVAL SIGNATURES:					
County Manager/Assistant County Manager Date Finance Director/Budget Administrator 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.					