	G/	ASTON	COUNTY BUDG	ET CHANGE	REQUEST	
TO:	TO: Earl Mathers		COUNTY M		GER	
FROM:	FROM: 5867 DH		IHS- Social Services			
T TOWN.	1 1.OW.		Department Name			
Department Director'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 Departments*  * Requires resolution by the Board of Commissioners						
			ACCOUNT	NUMBER		AMOUNT
ACCOUNT DESCRIPTION			Fund - Function - Dept - Division - Object		PROJECT	Whole Dollars Only
(As it appears in the budget)			xxx - xx - xxxx - xxxx - xxxxx		xxxxxx	(See Note Below)
Residental Child Care: Donations			020-05-5867-0000-415001-			(50,000)
Special Programs:Residental Child Care			020-05-5867-0000-560000-		16194	50,000
JUSTIFICATION FOR REQUEST:						
An anonymous donor through the Community Foundation of Gaston County has donated \$50,000 for Christmas gifts to be purchased for children associated with the Child and Family Services Division of Social Services. Items purchased						
will be toys, clothes, food and books for Christmas. The funds must be appropriated into the FY2018-2019 Social						
Services Budget in order to be used as intended by the donor.						

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.