| | GAST | ON COUNTY | BUDGET CHANGE | REQUEST | |
|---|---|-----------------|---|--|---|
| TO: | Earl Mathers | | COUNTY MANA | AGER | |
| FROM: | 4827 | DHHS- Social | Services | | |
| i row. | Dept. # | Department | Name | | |
| | Chris Dobbins | | 2/11/2019 | | |
| | Department Director' | s Name | Date | | |
| TYPE OF REQUE | ST: | | | | |
| Line Item Transfer Within Department & Fund Line Item Transfer Between Funds * | | | | | |
| Project Tr | ansfer Within Department | & Fund | X Addition | onal Appropriation of F | Funds * |
| Line Item | Transfer Between Departr | nents* | * Requir | res resolution by the E | Board of Commissioners |
| | | AC | COUNT NUMBER | | AMOUNT |
| ACCOUNT DESCRIPTION | | Fund - Fu | Fund - Function - Dept - Division - Object | | Whole Dollars Only |
| (As it appears in the budget) | | XXX - X | xxx - xx - xxxx - xxxx - xxxxx | | (See Note Below) |
| WIOA Finish Line Grant | | 020-05-48 | 020-05-4827-0000-425050- | | (50,000) |
| | | | | | |
| WIOA Finish Line Grant | | 020-05-48 | 020-05-4827-0000-560011- | | 50,000 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| JUSTIFICATION I | FOR REQUEST: | | | | |
| alleviate a finance funding targets a | cial barrier that would actively enrolled stude | otherwise prohi | rarded \$50,000 to assist of bit their completion of the ompleted at least 50% of ent within seven semeste | eir course of study their program red | v. This Finish Line Grant quirements and is |
| _ | ease graduation of clusters. 100% Federal | | | ora, i unua are iii | πιου το ψ1,000 per |
| | | | | | |

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.