GASTON COUNTY BUDGET CHANGE REQUEST					
TO:	Dr. Kim S. Eagle		COUNTY MANAGER		
FROM:	4150 C	ounty Attorney			
T NOW.		partment Name			
	Charles Moore		2/25/20		
Department Director's Name			Date		
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TYPE OF REQUE	ST:				
Line Item	Transfer Within Department & Fun	d	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					
	<u> </u>	A	CCOUNT NUMBER	AMOUNT	
ACCOL	JNT DESCRIPTION	Fund - Func	tion - Dept - Division - Object - Project	Whole Dollars Only	
(As it appears in the budget)		xxx - xx - xxxx - xxxx - xxxxx - xxxxxx		(See Note Below)	
Salaries		010-01-4150-0000-510001		\$54,424	
FICA		010-01-4150-00		\$4,163	
Retirement		010-01-4150-0000-510101		\$5,524	
Health Insurance		010-01-4150-0000-510103		\$11,500	
Training		010-01-4150-0000-520011		\$2,500	
Fund Balance		010-99-9900-0000-490000		[\$78,111]	
JUSTIFICATION FOR REQUEST:					
Appropriating \$78,111 of Fund Balance to pay salary, benefits, and training for the newly appointed County Attorney for					
the remainder of the 2020 fiscal year.					
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.					