	GA	SION CO	DUNIY BUDO	JEI CHA	NGE REQUEST	
TO:	TO: <u>Dr. Kim S. Eagle</u>			COUNTY MANAGER		
FROM:	4000		GCPD-ACE			
i itolvi.			partment Name			
Joseph Ramey				4/6/20		
Department Director's Name			e	Date		
TYPE OF REQUI	EQT:					
TIPE OF REQUI	-51 .					
Line Item Transfer Within Department & Fund				Line Item Transfer Between Funds *		
Project Transfer Within Department & Fund				Х	Additional Appropriation of F	-unds *
Line Item	Transfer Between De	partments*	* Requires resolution by the Board of Commissioners			
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			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)
Donation-Gaston Humane Society			010-02-4380-0000-415001-20052			[20,000.00]
Gaston Humane Society-Donation			010-02-4380-0000-560000-20052			20,000.00
JUSTIFICATION						
Money received by the Gaston Humane Society earmarked by donor for the purchase of furniture of the dog interaction						
areas at the new shelter and lockers for the staff lounge are required to be transferred from the revenue fund to the expenditure fund. GCACE would like the donations a total of \$20,000.00 (100%) in account						
010-02-4380-0000-415001-20052 (revenue) to be appropriated to the current fiscal year 19-20 into the Gaston Humane						
Society Donation account 010-02-4380-0000-560000-20052 (expenditure) to purchase of furniture of the dog interaction areas and lockers for the staff lounge located at Gaston County Animal Care and Enforcement-Animal shelter 1491						
Business Park Court, Gastonia, NC.						

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.