

## GASTON COUNTY BUDGET CHANGE REQUEST

TO: Dr. Kim S. Eagle COUNTY MANAGER

FROM: 5810 Hope United Survivors' Network

Dept. # Department Name

Tara Joyner 12/15/2020

Department Director's Name Date

### TYPE OF REQUEST:

☐ Line Item Transfer Within Department & Fund

☐ Line Item Transfer Between Funds \*

☐ Project Transfer Within Department & Fund

☒ Additional Appropriation of Funds \*

☐ Line Item Transfer Between Departments\*

\* Requires resolution by the Board of Commissioners

ACCOUNT DESCRIPTION (As it appears in the budget)	ACCOUNT NUMBER	AMOUNT
	Fund - Function - Dept - Division - Object - Project	Whole Dollars Only
	xxx - xx - xxxx - xxxx - xxxxx - xxxxxx	(See Note Below)
2020 GCC VOCA Grant	010-05-5810-5582-425033-21581	(\$218,856)
Salaries: 2020 GCC VOCA	010-05-5810-5582-510001-21581	\$181,530
FICA: 2020 GCC VOCA	010-05-5810-5582-510100-21581	\$6,582
Retire: 2020 GCC VOCA	010-05-5810-5582-510101-21581	\$7,744
Health: 2020 GCC VOCA	010-05-5810-5582-510103-21581	\$23,000

### JUSTIFICATION FOR REQUEST:

Grant funding will support partial salary and benefit costs for the following staff at The Cathy Mabry Cloninger Center: Case Manager, Bi-lingual Advocate, Crisis Line Advocate.

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.