GASTON COUNTY BUDGET CHANGE REQUEST			
TO:	Dr. Kim S. Eagle	COUNTY MANAGER	
FROM:		operative Extension	
Dept. # Department Name			
	David Fogarty	5/17/2021	
	Department Director's Nam	e Date	
TYPE OF REQUEST:			
	.01.		
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* <u>* Requires resolution by the Board of Commissioners</u>			
		ACCOUNT NUMBER	AMOUNT
ACCOU	INT 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)
4-H Local Progra	ams	010-07-4950-4952-410009-16276	[475]
4-H Programs		010-07-4950-4952-560000-16276	475
Fee Based Prog:Food/Supplies		010-07-4950-4950-415013-15226	[2798]
Fee Based Prog:Food/Supplies		010-07-4950-4950-560000-15226	2798
Something Pumpkin		010-07-4950-4950-415013-17272	[2152]
Something Pum	pkin	010-07-4950-4950-560000-17272	2152
JUSTIFICATION FOR REQUEST:			

This Budget Change Request is to accept and appropriate donated funds from Gaston Farm Bureau and Gaston ECA, along with workshop fees for the 2021 Master Gardener Course and 4-H summer camp.

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.