## MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

10/17/2025	
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TO:	MARION COU	NTY BOARD OF COUNTY COMMISSIONERS	'	Jaic
FROM:	K	atrina Neumann, Budget / Finance Commander		
	(Name and Title	of Department / Agency Head or Authorized Representative)	•	
Requesting th	ne following transfer	of funds within the		
	1110	MSTU FOR LAW ENFORCEMENT		
	Fund Number	Fund Name	-	
SOURCES O	F FUNDS:			
Cost Center	Account Number	Cost Center Name Account Name	AMOUNT	
120	337235	SHERIFF PATROL CID - TR HVE IPTM	\$	5,820
		TOTAL	\$	5,820
USES OF FU	NDS:		<u></u>	,
	Account Number	Cost Center Name Account Name	AMOUNT	
120	510101	SHERIFF PATROL CID - TR PERSONNEL SERVICES - MCSD	\$	5,820
		_		
		TOTAL	\$	5,820
PURPOSE O	F REQUEST:			
Requesting as they are i		gh Visibility Enforcement Grant funds. These funds will be reimburs	sed to t	he BOCC
		beived in the Budget Office before 10:00 A.M. on the Monday preceding regularly schedule adlines may be shortened due to the holidays or other scheduling conflicts.	d Tuesda	y meetings of
Sheriff	Office Reference N	lumber : MSTU #4		