MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

10/29/2024

Date

TO: MARION COUNTY BOARD OF COUNTY COMMISSIONERS

FROM:

Katrina Neumann, Budget / Finance Commander

(Name and Title of Department / Agency Head or Authorized Representative)

Requesting the 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	AM	AMOUNT	
120	364080	SHERIFF PATROL CID - TR INSURANCE PROCEEDS - AUTOMOTIVE	\$	40,306	
TOTAL				40,306	

USES OF FU	NDS:			-		
Cost Center	Account Number		Cost Center Name Account Name	AN	AMOUNT	
120	560101		SHERIFF PATROL CID - TR CAPITAL OUTLAY - MCSD	\$	40,306	
			TOTAL	\$	40,306	

PURPOSE OF REQUEST:

The purpose of this request is to add funds to the MSTU budget from insurance proceeds.

Budget amendment requests must be received in the Budget Office before 10:00 A.M. on the Monday preceding regularly scheduled Tuesday meetings of the Board of County Commissioners. Deadlines may be shortened due to the holidays or other scheduling conflicts.

Sheriff Office Reference Number :	MSTU#8
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