Rev. 10/31/2022

MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

10/20/2025	
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TO:	MARION COUNTY	BOARD OF COUNTY COMMISSIONERS		Date
FROM:	Katrii	na Neumann, Budget / Finance Commander		
	(Name and Title of D	Department / Agency Head or Authorized Representative)		
Requesting th	ne following transfer of t	unds within the		
	0010	GENERAL FUND		
SOURCES O	Fund Number F FUNDS:	Fund Name		
Cost Center	Account Number	Cost Center Name Account Name	AN	MOUNT
117	334235	SHERIFF EMERGENCY MGMT TR CIVIL PREPAREDNESS	\$	86,306
		TOTAL	\$	86,306
USES OF FU		Cost Center Name		
Cost Center	Account Number	Account Name	A۱	MOUNT
117	530101	SHERIFF EMERGENCY MGMT TR OPERATING EXPENSES - MCSD	\$	86,306
		_		
		TOTAL	\$	86,306
PURPOSE O	F REQUEST:			
	•	add funds from the FY 25/26 Emergency Preparedness and Assudget. These funds will be reimbursed to the BOCC as they are		
		d in the Budget Office before 10:00 A.M. on the Monday preceding regularly scheduled as may be shortened due to the holidays or other scheduling conflicts.	Tuesda	ay meetings of
Sheriff	Office Reference Num	ber: EM #6		