Rev. 10/31/2022

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

10/17/2025	

TO:	MARION COU	NTY BOARD OF COUNTY COMMISSIONERS		Date
FROM:	Ka	atrina Neumann, Budget / Finance Commander		
	(Name and Title	of Department / Agency Head or Authorized Representative)	•	
Poguacting th	ne following transfer	of funds within the		
Requesting ti	0010	GENERAL FUND	ī	
	Fund Number	Fund Name	l	
SOURCES O				
	Account Number	Cost Center Name	А	MOUNT
116	331248	Account Name SHERIFF JAIL - TRANSFER ST CRIMINAL ALIEN ASSIST	\$	174,737
<u>.                                    </u>				
		TOTAL	\$	174,737
USES OF FU	NDS:	Coat Conton Name	1	
Cost Center	Account Number	Cost Center Name Account Name	Α	MOUNT
116	530101	SHERIFF JAIL - TRANSFER OPERATING EXPENSES - MCSD	\$	174,737
		TOTAL	\$	174,737
PURPOSE O	F REQUEST:			
Requesting lireceived.	back FY 24/25 SC	AAP grant funds. These funds will be reimbursed to the BOCC as	they	are
		reived 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 Tuesd	ay meetings of
Sheriff	Office Reference N	umber : Jail #1		