Rev. 11/21/2023

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

		BUDGET AMENDMENT REQUEST FORM	06/	18/2024
				Date
TO:	MARION COU	NTY BOARD OF COUNTY COMMISSIONERS		
FROM:	Jeremiah Powell, CPA, Fiscal Director			
	(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 Contar Nama	_	
Cost Center	Account Number	Cost Center Name Account Name	AN	MOUNT
120	364041	SHERIFF PATROL CID - TR SALE OF SURPLUS EQUIPMENT	\$	460
120	364080	SHERIFF PATROL CID - TR INSURANCE PROCEEDS - AUTOMOTIVE		49,407
120	369910	SHERIFF PATROL CID - TR  OTHER		392
	NDO	TOTAL	\$	50,259
USES OF FU		Cost Center Name	T	
Cost Center	Account Number	Account Name	AMOUNT	
120	560101	SHERIFF PATROL CID - TR CAPITAL OUTLAY - MCSD	\$	50,259
		TOTAL	\$	50,259
		TOTAL	ΙΨ	30,233
PURPOSE O	F REQUEST:			
	e of this request is mbursement.	to add funds to the MSTU budget from insurance proceeds, vehi	cles so	ld, and an
		ceived in the Budget Office before 10:00 A.M. on the Monday preceding regularly sched Deadlines may be shortened due to the holidays or other scheduling conflicts.	uled Tues	day meetings

MSTU #22

Sheriff Office Reference Number :