

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

04/04/2024

Date

**TO: MARION COUNTY BOARD OF COUNTY COMMISSIONERS**

**FROM:** *Jeremiah Powell, CPA, Fiscal Director*

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

Requesting the following transfer of funds within the

0010	GENERAL FUND
Fund Number	Fund Name

**SOURCES OF FUNDS:**

Cost Center	Account Number	Cost Center Name Account Name	AMOUNT
116	364041	SHERIFF JAIL - TRANSFER SALE OF SURPLUS EQUIPMENT	\$ 47
116	364080	SHERIFF JAIL - TRANSFER INSURANCE PROCEEDS - AUTOMOTIVE	463
<b>TOTAL</b>			<b>\$ 510</b>

**USES OF FUNDS:**

Cost Center	Account Number	Cost Center Name Account Name	AMOUNT
116	560101	SHERIFF JAIL - TRANSFER CAPITAL OUTLAY - MCSD	\$ 510
<b>TOTAL</b>			<b>\$ 510</b>

**PURPOSE OF REQUEST:**

The purpose of this request is to add funds to the Jail Budget from waste oil and 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 :	Jail #7
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