MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

10/25/2024

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	<u> </u>	
SOURCES O	F FUNDS:			
Cost Center	Account Number	Cost Center Name Account Name	A	MOUNT
120	334240	SHERIFF PATROL CID - TR SAFE IN FL PROGRAM	\$	172,995
		TOTAL	\$	172,995

USES OF FU	NDS:					
Cost Center	Account Number		Cost Center Name Account Name	A	AMOUNT	
120	510101		SHERIFF PATROL CID - TR PERSONNEL SERVICES - MCSD	\$	36,595	
120	530101		SHERIFF PATROL CID - TR OPERATING EXPENSES - MCSD		136,400	
			TOTAL	\$	172,995	

PURPOSE OF REQUEST:

Requesting back FY 23/24 FDLE S.A.F.E Fentanyl funds.These funds will be reimbursed to the BOCC as they are received.

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 #4
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