

MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

07/23/2025

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

0010	GENERAL FUND
Fund Number	Fund Name

SOURCES OF FUNDS:

Cost Center	Account Number	Cost Center Name Account Name	AMOUNT
117	590101	SHERIFF EMERGENCY MGMT TR NON - OPERATING - MCSD	\$ 3,266
TOTAL			\$ 3,266

USES OF FUNDS:

Cost Center	Account Number	Cost Center Name Account Name	AMOUNT
117	530101	SHERIFF EMERGENCY MGMT TR OPERATING EXPENSES - MCSD	\$ 3,266
TOTAL			\$ 3,266

PURPOSE OF REQUEST:

The purpose of this request is to transfer contingency funds to operating expenses in the Emergency Management Budget.

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 :

EM #9