MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

10/25/2024	
Data	

TO:	MARION COU	NTY BOARD OF COUNTY COMMISSIONERS		Date
FROM:	K	atrina Neumann, Budget / Finance Commander		
	(Name and Title	of Department / Agency Head or Authorized Representative)	_	
Poguesting th	ne following transfei	of funds within the		
Requesting ti	1110	MSTU FOR LAW ENFORCEMENT	7	
	Fund Number	Fund Name	_	
SOURCES O	F FUNDS:			
Cost Center	Account Number	Cost Center Name	Al	MOUNT
120	331287	Account Name SHERIFF PATROL CID - TR	\$	55,000
	001201	INTERNET CRIMES AGAINST CHILDREN	+	
		TOTAL	•	55 000
USES OF FU	INDS:	TOTAL	\$	55,000
Cost Center		Cost Center Name Account Name	AMOUNT	
120	530101	SHERIFF PATROL CID - TR OPERATING EXPENSES - MCSD	\$	55,000
		TOTAL	\$	55,000
PURPOSE O	F REQUEST:			
Requesting received.	back FY 23/24 FE	OLE ICAC funds. These funds will be reimbursed to the BOCC as	they are	е
		ceived in the Budget Office before 10:00 A.M. on the Monday preceding regularly schedul adlines may be shortened due to the holidays or other scheduling conflicts.	ed Tuesda	ay meetings of
Sheriff	Office Reference N	lumber : MSTU #2		