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

11/07/2024	

TO:	MARION COUNTY	BOARD OF COUNTY COMMISSIONERS		Date
FROM:	Katrin	a Neumann, Budget / Finance Commander		
	(Name and Title of D	epartment / Agency Head or Authorized Representative)		
Requesting th	ne following transfer of fu	unds within the		
	0010	GENERAL FUND		
SOURCES O	Fund Number F FUNDS:	Fund Name		
Cost Center	Account Number	Cost Center Name Account Name	A۱	MOUNT
117	334235	SHERIFF EMERGENCY MGMT TR CIVIL PREPAREDNESS	\$	86,306
		TOTAL	\$	86,306
USES OF FU		Cost Center Name		
Cost Center	Account Number	Account Name	A۱	MOUNT
117	530101	SHERIFF EMERGENCY MGMT TR OPERATING EXPENSES - MCSD	\$	86,306
		TOTAL	\$	86,306
PURPOSE O	F REQUEST:			
	e of this request is to a to the BOCC as they a	dd funds from the 24/25 EMPA grant to the EM budget. These are received.	funds	will be
		in the Budget Office before 10:00 A.M. on the Monday preceding regularly scheduled s may be shortened due to the holidays or other scheduling conflicts.	Tuesda	ly meetings of
Sheriff	Office Reference Numb	er : EM #5		