MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

05/30/2025

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

	1110	MSTU FOR LAW ENFORCEMENT		
	Fund Number	Fund Name		
SOURCES O	F FUNDS:			
Cost Center Account Number		Cost Center Name Account Name	AM	IOUNT
120	364080	SHERIFF PATROL CID - TR INSURANCE PROCEEDS - AUTOMOTIVE	\$	9,559
120	364041	SHERIFF PATROL CID - TR SALE OF SURPLUS EQUIPMENT		1,196
		TOTAL	\$	10,755

USES OF FU	NDS:						
Cost Center	Account Number		Cost Center Name Account Name	AM	IOUNT		
120 560101			SHERIFF PATROL CID - TR CAPITAL OUTLAY - MCSD	\$ 10			
	1		TOTAL	\$	10,755		

PURPOSE OF REQUEST:

The	purp	ose of t	his r	eauest	is tc	add	funds	to th	he MS	STU	budaet	from	insurance	proceeds	and	vehicles so	ld.

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 #28