Rev. 12/22/2023

MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

07/18/2024

TO:	MARION COU		Date	
FROM:	Jeremiah Powell, CPA, Fiscal Director			
	(Name and Title	of Department / Agency Head or Authorized Representative)	-	
Requesting the following transfer of fund			7	
	1010 Fund Number	FINE AND FORFEITURE FUND Fund Name	<u> </u>	
SOURCES O		Tana Hamo		
	Account Number	Cost Center Name	AN	MOUNT
118	590101	Account Name SHERIFF REGULAR - TRANSFER NON - OPERATING - MCSD	\$	3,266
			<u> </u>	
		TOTAL	\$	3,266
USES OF FU	NDS:	TOTAL	ΙΨ	0,200
Cost Center		Cost Center Name Account Name	AMOUNT	
118	510101	SHERIFF REGULAR - TRANSFER PERSONNEL SERVICES - MCSD	\$	3,266
			<u> </u>	
			 	
			 	
		TOTAL	\$	3,266
PURPOSE O	F REQUEST:			
	e of this request is	to transfer contingency funds to personnel services in the Emerge	ency	
		reived in the Budget Office before 10:00 A.M. on the Monday preceding regularly scheduled adlines may be shortened due to the holidays or other scheduling conflicts.	ed Tuesda	y meetings of
Sheriff	Office Reference N	umber : EM #9		