

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

10/25/2024

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	334232	SHERIFF EMERGENCY MGMT TR HAZARD ANALYSIS GRANT PROGRAM	\$ 2,106
<b>TOTAL</b>			<b>\$ 2,106</b>

**USES OF FUNDS:**

Cost Center	Account Number	Cost Center Name Account Name	AMOUNT
117	530101	SHERIFF EMERGENCY MGMT TR OPERATING EXPENSES - MCSD	\$ 2,106
<b>TOTAL</b>			<b>\$ 2,106</b>

**PURPOSE OF REQUEST:**

Requesting back FY 23/24 Hazmat grant funds. These funds will be reimbursed to the BOCC as they are received.

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 #1
-----------------------------------	-------