TRANSFER OF APPROPRIATIONS

Muskogee County, Oklahoma	Fiscal Year Ending June 30, 2025
To the Honorable Governing Board: Due to a need which has arisen in my office or department, 62 O.S. § 461, I hereby request additional appropriations for fund as shown in exhibit B. I further state that I have obtain appropriations balances detailed in Exhibit A as evidenced b The reason for this requested transfer is as follows: for purchase of haul truck and rebuild of motor on freig	r current expense in the HWY Cash Cap Out ed written consent to the cancellation of y the signature of the department heads in schedule 2.
Respectfully submitted this day of 10/10/24 Signature and Title of Officer(s)/Department Head(s):	
- Demil Tay	
CONSENT TO CANCEL: I (we) the undersigned official(s)/department head(s) of the consent to the cancellation of appropriation balances details Signature and Title of Officer(s)/Department Head(s):	above named governmental agency do hereby ed in Exhibit A.
CONSENT TO CANCEL AND REQUEST FOR ADDITIONAL NEED We the undersigned Governing Board under authority of 68 the cancellation of the appropriation balances detailed in exappropriated to the accounts detailed in Exhibit B. We furth reason:	O.S. § 3021 and 62 O.S. § 461, do hereby consent to hibit A and request that the revenues released be
Done in a meeting of the Governing Board of the said govern Secretary of Clerk of said board and signed at Secretary/Clerk of Secretary/Clerk of Secretary/Clerk of the Muskogee County Excise Board that there has been a to the governing board of	Chairman Chairman Muskogee County, Oklahoma, gives notice to
ATTEST:	
	County Clerk
	Date

Exhibit A

Unencumbered appropriations account balances as of

10/15/2024

and schedule of amounts to be cancelled.

Account #	Name of Account	Office/Department	Unencumbered Balance	Consent to cancel by Officer	Cancelled by Governing Board
1102-6-6530-2005	CIRB 3 M&O		225,420.40		60,000.00
					a Company
			and the second s		
			TOTAL:	\$ 0.00	\$ 60,000.00

Exhibit B

Additional appropriations requested for remainder of fiscal year ending

June 2025

Account #	Purpose or Name of Account	Office/Department	Amount Reque	ested	Approved by Governing Board	
1102-6-4300-4110	HWY Cash-Cap Outlay		6	0,000.00		
			2-13/10/23/23/23/23/23/23/23/23/23/23/23/23/23/			
	and the second of the	1 - 4 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2				
						
	We have some the state of the					
		TOTAL:	\$ 60,000.00			

Note: the total amount of additional appropriations may not exceed the total amount approved for cancellation.