

**TRANSFER OF APPROPRIATIONS  
OKLAHOMA COUNTY  
FISCAL YEAR ENDING: June 30, 2025**

Resolution #:

20251917

FUND:

General Fund

Due to a need which has arisen in my office or department, and under authority of 68 O.S. § 3021, and 62 O.S. 461 I hereby request additional appropriations for current expense in the fund as shown in Exhibit B. I further state that I have obtained written consent to the cancellation of appropriation balances detailed in Exhibit A as evidenced by the signature of the department heads in schedule 2.  
The reason for this transfer is as follows:  
Transfer is to cover milage shortfall.

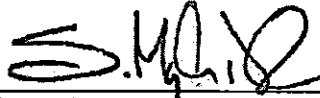
Respectfully submitted on:

5/12/2025

DATE

Board of County Commissioners, Chairman  
of the Board

Title



OFFICER/DEPARTMENT HEAD SIGNATURE

**CONSENT TO CANCEL:**

I (we) the undersigned official(s)/department head(s) of the above named governmental agency do hereby consent to the cancellation of appropriation balances detailed in Exhibit A.

Title

OFFICER/DEPARTMENT HEAD SIGNATURE

**CONSENT TO CANCEL AND REQUEST FOR ADDITIONAL NEEDS:**

We, the undersigned Governing Board under the authority of 68 O.S. § 3021, and 62 O.S. § 461, do hereby consent to the cancellation of the appropriation balances detailed in Exhibit A and request that the revenues released be appropriated to the accounts detailed in Exhibit B. We further state that this request is made due to the following reason:

Done in a meeting of Governing Board of the said governmental agency and recorded in the minutes of the Secretary or Clerk of said board and signed at Oklahoma City, Oklahoma,  
on: 15th Day of May 2025

Attest:

County Clerk and Secretary to the Board

Chairman of the Budget Board

Vice-Chairman of the Budget Board

## TRANSFER OF APPROPRIATIONS

**Resolution #**

2025-1917

## Exhibit A

Unencumbered appropriations account balances as of: 5/12/25 and schedule of amounts to be cancelled.

County Commissioner

Office or Department

Org Code	Name of Account & Number		Cost Center	Unencumbered Balance	Consent to cancel by Officer	Cancelled by Governing Board
10112000	Salary	54000	120	127,512.23	1,199.28	1,199.28
						-
						-

**Exhibit B**

**Additional appropriations requested for remainder of fiscal year ending 6/30/2025**

6/30/2025

**County Commissioner**

Office or Department

ORG CODE	NAME OF APPROPRIATION & ACCOUNT #		COST CENTER	AMOUNT REQUESTED	APPROVED BY BOARD
10112000	Travel	53000	120	1,199.28	1,199.28
					-
					-
					-
					-
					-
					-
					-
					-
					-
					-
			<b>TOTALS</b>	\$ 1,199.28	\$ 1,199.28

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