

**TRANSFER OF APPROPRIATIONS  
OKLAHOMA COUNTY  
FISCAL YEAR ENDING: June 30, 2026**

Resolution #: 2026-0144 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 General Fund premiums to cover anticipated expenses for the FY26.

Respectfully submitted on:

12/5/2025  
DATE

**Charirman, Board of County  
Commissioners**

Title



Brian Vaughan  
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 January 2026

Attest:

\_\_\_\_\_  
County Clerk and Secretary to the Board

\_\_\_\_\_  
Chairman of the Budget Board

\_\_\_\_\_  
Vice-Chairman of the Budget Board

## **TRANSFER OF APPROPRIATIONS**

Resolution # 2026-0144

## Exhibit A

Unencumbered appropriations account balances as of: **1/8/26** and schedule of amounts to be cancelled.

## **Employee Benefit Supplement 991** Office or Department

## Exhibit B

Additional appropriations requested for remainder of fiscal year ending

6/30/2026

Employee Benefits 4010      Office or Department

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