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

Resolu	ition #:	2024-5179	FUND:	Employee Benefits Supplement				
Due to	a need which h	as arisen in my office or de	partment, and under a	uthority of 68 O.S. § 3021, and 62 O.S. 461				
			-	d as shown in Exhibit B. I further state				
			-	balances detailed in Exhibit A as evidenced				
by the s	signature of the	department heads in sched	ule 2.					
The rea	ason for this tra	nsfer is as follows:						
This is	to transfer C.	JA premiums for October	2024 and the remain	ning from the Employee Benefits Supplement 991				
Respec	tfully submitted	l on:						
		11/13/20	024					
	~	DATE						
		n, Board of County	7	Sin Manchan				
	Co	mmissioners						
Title				OFFICER/DEPARTMENT HEAD GNATURE				
CONS	ENT TO CAN	CEL:						
I (we)	the undersigned	l official(s)/department head	d(s) of the above name	ed governmental agency do				
hereby	consent to the	cancellation of appropriatio	n balances detailed in	Exhibit A.				
				2.001				
		n, Board of County	/	Kani Manehan				
	Co	mmissioners		Juan				
Title				OFFICER/DEPARTMENT HEAD SIGNATURE				
CONS		CEL AND DEQUEST EC	ND ADDITIONAL N	EEDC.				
CONS	ENI IUCAN	CEL AND REQUEST FO	JR ADDITIONAL N	EEDS:				
We, the	e undersigned (Boverning Board under the	authority of 68 O.S. §	3021, and 62 O.S. § 461, do hereby consent				
to the	to the cancellation of the appropriation balances detailed in Exhibit A and request that the revenues released							
	•	accounts detailed in Exhibi	t B. We further state the	hat this request is made due to the				
	ing reason:	IA anominana fan Ostakon	2024 and the name:	in a from the Employee Denefite Supplement 001				
1 115 15	to transfer C.	JA premiums for October	2024 and the remain	ning from the Employee Benefits Supplement 991				
	-	-		y and recorded in the minutes				
	2	erk of said board and signed		oma City, Oklahoma,				
on:	21st	Day of Novemb	ber 2024					
Attest:								

County Clerk and Secretary to the Board

Chairman of the Budget Board

Vice-Chairman of the Budget Board

TRANSFER OF APPROPRIATIONS

2024-5179 Resolution #

Exhibit A

Unencumbered appropriations account balances as of: 11/13/24 and schedule of amounts to be cancelled. Employee Benefits Supplement Office or Department

Org Code	Name of Accou	unt & Number	Cost Center	Unencumbered Balance	Consent to cancel by Officer	Cancelled by Governing Board
10199100	M&O	54000	991	15,962,947.92	2,534,030.00	2,534,030.00
						-
				TOTALS	\$ 2,534,030.00	\$ 2,534,030.00

Exhibit B

Additional appropriations requested for remainder of fiscal year ending

6/30/2025

Employee Benefits Office or Department

ORG CODE	RG CODE NAME OF APPROPRIATION & ACCOUNT #		COST CENTER	AMOUNT REQUESTED	APPROVED BY BOARD
40110110	M&O	54000	110	2,534,030.00	2,534,030.00
					-
					-
					-
					-
					-
			TOTALS	\$ 2,534,030.00	\$ 2,534,030.00

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