

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

Resolution #: 2026-2190 **FUND:** ARPA

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:

This transfer is necessary since PO is no longer needed for this project and the reallocation of the remaining funds to Behavioral Care Center

Respectfully submitted on:

5/18/2026
DATE

**Chairman, Board of County
Commissioners**

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.

_____ 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: 21st Day of May 2026

Attest:

_____ County Clerk and Secretary to the Board

_____ Chairman of the Budget Board

_____ Vice-Chairman of the Budget Board

TRANSFER OF APPROPRIATIONS

Resolution # 2026-2190

Exhibit A

Unencumbered appropriations account balances as of: 5/18/26 and schedule of amounts to be cancelled.

ARPA 1415 Office or Department

Org Code	Name of Account & Number	Cost Center	Unencumbered Balance	Consent to cancel by Officer	Cancelled by Governing Board
14153309	Capital 55025	AR033	282,302.95	282,302.95	282,302.95
					-
					-
					-
					-
					-
					-
					-
					-
					-
					-
					-
					-
					-
					-
					-
TOTALS				\$ 282,302.95	\$ 282,302.95

Exhibit B

Additional appropriations requested for remainder of fiscal year ending 6/30/2026

Behavioral Care Center Office or Department

ORG CODE	NAME OF APPROPRIATION & ACCOUNT #	COST CENTER	AMOUNT REQUESTED	APPROVED BY BOARD
14153305	Capital 55055	AR130	282,302.92	282,302.92
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS			\$ 282,302.92	\$ 282,302.92

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