

Budget Transfer Form

Date: _____ School / Dept: _____

Transfer Amount: \$ _____ Authorized Signature: _____

Transfer FROM: _____
(Account Number) (Account Description)

Transfer TO: _____
(Account Number) (Account Description)

Reason for Transfer: _____

DO NOT WRITE BELOW THIS LINE

Asst. Superintendent Approval: _____

Transfer processed by: _____ Date: _____

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