

REQUEST FOR BUDGET ADJUSTMENT TRANSFER

This form is to be used only for adjusting accounts within a particular fund.



School Name _____

Fund Number _____
(ex. 200-9000, 018-9111)

Amount to Transfer _____

From Budget Account Number _____

To Budget Account Number _____

Reason for Transfer: _____

Sponsor/Advisor

Cashier

Principal

Date

.....
For Treasurer's Office Use

Date Budget Adjustment Completed _____

For Treasurer's Office _____

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AFTER FORM IS COMPLETED WITH SIGNATURES, MAKE TWO COPIES. SEND THE ORIGINAL AND ONE COPY TO THE TREASURER'S OFFICE WHEN TRANSFER IS COMPLETED, YOUR COPY WILL BE RETURNED.