



FISCAL YEAR _____ - _____

REQUEST FOR BUDGET TRANSFER

SCHOOL / DEPARTMENT _____

Company/Fund (Please Check One)

- 1100 OPERATIONAL
1300 TRANSPORTATION
1400 TEXTBOOK
2100 FOOD SERVICES

- 2200 ATHLETICS
4100 DEBT SERVICES
4300 ED TECH DEBT SERVICES
6001 KANW ENTERPRISE

- 6005 GRAPHICS ENTERPRISE
6010 CHARTER SCHOOL BUSINESS SVCS
6020 TRANSPORTATION ENTERPRISE
6025 FACILITIES ENTERPRISE

INTERNAL SERVICES FUNDS
7101 INSURANCE SERVICES
7102 CONSTRUCTION SERVICES

FROM

TO

Table with columns: ACCOUNTING UNIT, ACCOUNT, SUB, FTE, DESCRIPTION, AMOUNT (FROM); and DESCRIPTION, ACCOUNTING UNIT, ACCOUNT, SUB, FTE (TO). Multiple rows for data entry.

TOTAL: _____

(IF TOTAL AMOUNT IS OVER \$10,000 CONTROL AGENT SIGNATURE IS REQUIRED)

Justification Required (Describe What Will Be Purchased With Funds)

Blank area for justification text.

Name of Originator _____ Date _____

Department Manager/Principal _____ Date _____

Control Agent _____ Date _____

Phone Number & Ext. _____

PLEASE SEND ELECTRONICALLY TO YOUR BUDGET ANALYST

FOR BUDGET OFFICE USE ONLY:

DATE APPROVED

DATE REJECTED

REASON

NOTES

PED OBMS BAR# _____

DOC I.D. _____

DATE IN _____

DATE OUT _____

ANALYST _____

BUDGET JE# _____