

**EVERGREEN SCHOOL DISTRICT**

**B**

BUDGET TRANSFER REQUEST

School/Department \_\_\_\_\_ Date \_\_\_\_\_

**Decrease:**  
(Debit)

FND	RESC	Y	OBJC	SO	GOAL	FUNC	SCH
				00			
				00			
				00			
				00			

Amount

\$
\$
\$
\$

**Increase:**  
(Credit)

FND	RESC	Y	OBJC	SO	GOAL	FUNC	SCH
				00			
				00			
				00			
				00			

Amount

\$
\$
\$
\$

Reason for Transfer \_\_\_\_\_

\_\_\_\_\_  
Principal/Supervisor Signature

\_\_\_\_\_  
Date

Business Office Use:

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Fiscal Director \_\_\_\_\_ Date \_\_\_\_\_

Reason \_\_\_\_\_

Posted By \_\_\_\_\_ Posted Date \_\_\_\_\_

Budget Transfer No. \_\_\_\_\_

Distribution: 2 Copies for Business Office; 1 Copy for Originator