

Cherokee County Schools

Dr. Keevin G. Woody, Superintendent
911 Andrews Road, Murphy, NC 28906
(828) 837-2722 ~ Fax (828) 837-5799
www.cherokee.k12.nc.us

BUDGET TRANSFER REQUEST FORM

Date: _____
PRC: _____

BUDGET TRANSFER <u>"FROM"</u>	BUDGET TRANSFER <u>"TO"</u>	AMOUNT OF <u>BUDGET TRANSFER</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

EXPLANATION FOR BUDGET TRANSFER(S):

Requestor Name: _____
Print

Requestor Signature: _____

Approver Signature: _____
(if not Superintendent)

Date: _____

Superintendent's Signature: _____

Date: _____

Review & Process Date: _____

Board of Education

Ms. Shannon Raper, Chair, Mr. James Ellis, Vice Chair, Mr. Steve Coleman,
Ms. Jeannie Gaddis, Mr. Arnold Mathews, Mr. Jason Murphy, and Mr. Jeff Tatham
An Equal Opportunity/Affirmative Action Employer

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INSTRUCTIONS FOR BUDGET TRANSFER REQUEST FORM

Please print legibly and complete the entire form.

DATE:

Date of the budget transfer request.

PRC:

Provide the program code that you are requesting the transfer for.

BUDGET TRANSFER "FROM":

Please provide complete account number (fund, purpose code, PRC, and object code) to be charged for the transfer. If more than one account number is appropriate, then individually list each complete account number.

BUDGET TRANSFER "TO":

Provide complete account number (fund, purpose code, PRC, and object code) to receive the transfer. If more than one account number is appropriate, then individually list each complete account number.

AMOUNT OF BUDGET TRANSFER:

Indicate the amount of each transfer.

EXPLANATION FOR BUDGET TRANSFER(S):

Provide an explanation for each transfer requested.

REQUESTOR NAME:

The person requesting the transfer must print their name

APPROVER NAME, SIGNATURE, and DATE:

The budget manager or CFO must print their name, sign, and date the form indicating their approval of this transfer.

SUPERINTENDENT NAME, SIGNATURE, and DATE:

For transfers of \$500 or more, the superintendent must print their name, sign, and date the form indicating their approval of the transfer.

Please allow adequate processing time for this transfer. Incomplete forms will add to the time required to meet your request.

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