

BUDGETARY TRANSFER REQUEST FORM

Warren County School District

Individual Requesting
Transfer of Funds:

MEAD

Date: 8.9.21

Building: C.O.

Budget
Year: 20.21

Page 1 of 9

This is the current "budget," amount not the current balance amount.

Budget Request #1 The amount of funds requested for transfer from this account indicates more funds are available than required this year.

#1	From(Cr):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	01 1231 000 12 32 112	120	Regular Salary	0.06	63,835.00	63,834.94
	01 1232 000 12 32 112	120	Regular Salary	112.41	24,705.00	24,592.59
	01 1241 000 22 02 112	120	Regular Salary	9.08	68,950.00	68,940.92
	01 1241 000 22 05 112	120	Regular Salary	112.61	24,705.00	24,592.39
	01 1211 000 22 04 112	190	Teacher's Aides Salary	476.58	4,463.81	3,987.23
	01 1233 000 12 32 112	190	Teacher's Aides Salary	1,306.26	9,660.42	8,354.16
	01 1233 000 22 02 112	190	Teacher's Aides Salary	23.94	4,485.20	4,461.26
	01 1241 000 12 10 112	190	Teacher's Aides Salary	129.15	21,390.93	21,261.78
	01 1241 000 12 32 112	190	Teacher's Aides Salary	1,306.26	9,660.42	8,354.16
	01 1241 000 22 02 112	190	Teacher's Aides Salary	72.01	13,455.59	13,383.58
			Balances to Page 2			
			TOTAL CREDITS	3,548.36	245,311.37	241,763.01

This is the current "budget," amount not the current balance amount.

Budget Request #1 The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.

#1	To (Db):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	01 1241 000 22 01 112	120	Regular Salary	1,656.24	57,330.00	58,986.24
	01 2220 000 00 55 112	120	Regular Salary	871.23	7,365.57	8,236.80
	01 1211 000 22 04 112	211	Group Medical Insurance	1,998.96	4,756.53	6,755.49
	01 1241 000 22 05 112	211	Group Medical Insurance	1,953.04	7,299.96	9,253.00
	01 2220 000 00 55 112	211	Group Medical Insurance	1,542.27	697.62	2,239.89
	01 2220 000 00 55 112	230	Retirement	1,215.84	2,541.86	3,757.70
	01 1241 000 12 32 112	211	Group Medical Insurance	810.58	9,194.82	10,005.40
	01 1233 000 22 02 112	211	Group Medical Insurance	769.66	0.00	769.66
	01 1241 000 22 01 112	230	Retirement	571.54	19,784.58	20,356.12
			Balances to Page 2			
			TOTAL DEBITS	11,389.36	108,970.94	120,360.30

Directions: This form is to be submitted by the individual who has "budget oversight responsibility" and the authority to transfer funds in accordance with Board Policy. When it is determined that a specific budget account requires additional funds beyond those originally budgeted to meet approved/planned expenditures, a request may be made to transfer funds from a budget account that has "excess funds" available from what was estimated in the budget. Questions on any requested budget transfers should be forwarded to the Director of Business Services.

CENTRAL OFFICE APPROVAL: 

DATE: 8/23/2021
8/23/2021

BUDGETARY TRANSFER REQUEST FORM

Warren County School District

Individual Requesting
Transfer of Funds: _____

Date: _____

Building: _____

Budget
Year: _____

This is the current "budget," amount not the current balance amount.

The amount of funds requested for transfer from this account indicates more funds are available than required this year.

Budget Request #1	From(Cr):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	Balances from Page 1			3,548.36	245,311.37	241,763.01
	01 1241 000 22 04 112	190	Teacher's Aides Salary	1,503.24	32,142.84	30,639.60
	01 1241 000 22 06 112	190	Teacher's Aides Salary	36.90	19,320.84	19,283.94
	01 1290 000 12 11 112	190	Teacher's Aides Salary	47.76	29,833.05	29,785.29
	01 1290 000 12 12 112	190	Teacher's Aides Salary	32.07	14,395.26	14,363.19
	01 1290 000 12 32 112	190	Teacher's Aides Salary	17,940.78	17,940.78	0.00
	01 1290 000 22 01 112	190	Teacher's Aides Salary	139.54	34,745.54	34,606.00
	01 1290 000 22 02 112	190	Teacher's Aides Salary	95.94	19,320.84	19,224.90
	01 1290 000 22 05 112	190	Teacher's Aides Salary	15,558.83	30,021.45	14,462.62
						0.00
						0.00
	Balances to Page 3					0.00
	TOTAL CREDITS			38,903.42	443,031.97	404,128.55

This is the current "budget," amount not the current balance amount.

The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.

Budget Request #1	To (Db):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	Balances from Page 1			11,389.36	108,970.94	120,360.30
	01 1290 000 22 01 112	220	Social Security	228.81	2,658.03	2,886.84
	01 1290 000 22 02 112	220	Social Security	190.49	1,478.04	1,668.53
	01 1232 000 12 32 112	212	Group Dental Insurance	108.46	253.14	361.60
	01 1241 000 22 05 112	212	Group Dental Insurance	98.96	253.14	352.10
	01 1290 000 22 02 112	212	Group Dental Insurance	71.95	243.96	315.91
	01 1290 000 22 02 112	213	Life Insurance	42.08	75.48	117.56
	01 1290 000 22 01 112	213	Life Insurance	17.68	144.96	162.64
	01 1241 000 22 04 112	213	Life Insurance	15.47	126.84	142.31
	01 1241 000 12 10 112	213	Life Insurance	8.84	72.48	81.32
	01 1241 000 12 10 112	213	Life Insurance	8.84	72.48	81.32
	Balances to Page 3					
	TOTAL DEBITS			12,180.94	114,349.49	126,530.43

Directions: This form is to be submitted by the individual who has "budget oversight responsibility" and the authority to transfer funds in accordance with Board Policy. When it is determined that a specific budget account requires additional funds beyond those originally budgeted to meet approved/planned expenditures, a request may be made to transfer funds from a budget account that has "excess funds" available from what was estimated in the budget. Questions on any requested budget transfers should be forwarded to the Director of Business Services.

CENTRAL OFFICE APPROVAL:

4.12202 Budgetary Transfer Request Form

John Mead

DATE: 8/23/21

8/23/2021

BUDGETARY TRANSFER REQUEST FORM

Warren County School District

Individual Requesting
Transfer of Funds: _____

Date: _____

Building: _____

Budget
Year: _____

This is the current "budget," amount not the current balance amount.

Budget
Request
#1

The amount of funds requested for transfer from this account indicates more funds are available than required this year.

#1	From(Cr):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
			Balances from Page 2	38,903.42	443,031.97	404,128.55
	01 1233 000 22 02 112	213	Life Insurance	3.05	18.12	15.07
	01 1233 000 22 02 112	220	Social Security	4.70	343.12	338.42
	01 1241 000 22 02 112	213	Life Insurance	5.29	144.96	139.67
	01 1233 000 22 02 112	230	Retirement	8.25	1,547.84	1,539.59
	01 1290 000 12 12 112	230	Retirement	11.06	4,967.80	4,956.74
	01 1241 000 22 06 112	230	Retirement	12.70	6,667.62	6,654.92
	01 1211 000 22 04 112	212	Group Dental Insurance	13.27	207.18	193.91
	01 1290 000 12 11 112	230	Retirement	16.46	10,295.38	10,278.92
	01 1241 000 12 32 112	212	Group Dental Insurance	18.62	253.14	234.52
	01 2220 000 00 55 112	212	Group Dental Insurance	18.77	24.48	5.71
			Balances to Page 4			
			TOTAL CREDITS	39,015.59	467,501.61	428,486.02

Budget
Request
#1

The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.

This is the current "budget," amount not the current balance amount.

#1	To (Db):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
			Balances from Page 2	12,180.94	114,349.49	126,530.43
	01 1241 000 22 06 112	213	Life Insurance	8.84	72.48	81.32
	0112900001211112	213	Life Insurance	44.06	108.72	152.78
	01 1233 000 12 32 112	213	Life Insurance	4.42	36.24	40.66
	01 1241 000 12 32 112	213	Life Insurance	4.42	36.24	40.66
	01 1231 000 12 32 112	213	Life Insurance	3.85	90.60	94.45
	01 1241 000 22 01 112	213	Life Insurance	3.85	90.60	94.45
	01 1211 000 22 04 112	213	Life Insurance	2.21	18.12	20.33
	01 1241 000 22 05 112	213	Life Insurance	1.93	45.30	47.23
	01 1232 000 12 32 112	213	Life Insurance	1.92	45.30	47.22
	01 1241 000 12 10 112	211	Group Medical Insurance	0.09	18,389.64	18,389.73
			Balances to Page 4			
			TOTAL DEBITS	12,256.53	133,282.73	145,539.26

Directions: This form is to be submitted by the individual who has "budget oversight responsibility" and the authority to transfer funds in accordance with Board Policy. When it is determined that a specific budget account requires additional funds beyond those originally budgeted to meet approved/planned expenditures, a request may be made to transfer funds from a budget account that has "excess funds" available from what was estimated in the budget. Questions on any requested budget transfers should be forwarded to the Director of Business Services.

CENTRAL OFFICE APPROVAL: _____

[Signature]

DATE: 8/23/21

BUDGETARY TRANSFER REQUEST FORM

Warren County School District

Individual Requesting
Transfer of Funds: _____

Date: _____

Building: _____

Budget
Year: _____

Budget
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This is the current "budget," amount not the current balance amount.

From(Cr):	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	Balances from Page 3			39,015.59	467,501.61	428,486.02
	01 1233 000 12 32 112	212	Group Dental Insurance	23.11	253.14	230.03
	01 1241 000 22 02 112	230	Retirement	27.95	28,438.18	28,410.23
	01 1290 000 22 02 112	230	Retirement	33.07	6,667.62	6,634.55
	01 1233 000 22 02 112	212	Group Dental Insurance	33.48	126.57	93.09
	01 1290 000 22 01 112	212	Group Dental Insurance	35.84	506.28	470.44
	01 1232 000 12 32 112	230	Retirement	38.80	8,525.70	8,486.90
	01 1241 000 22 05 112	230	Retirement	39.01	8,525.70	8,486.69
	01 1241 000 12 10 112	230	Retirement	43.53	7,382.01	7,338.48
	01 1241 000 12 10 112	212	Group Dental Insurance	46.29	506.28	459.99
	01 1241 000 22 06 112	212	Group Dental Insurance	46.29	506.28	459.99
	Balances to Page 5					
	TOTAL CREDITS			39,382.96	528,939.37	489,556.41

Budget
Request
#1

The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.

This is the current "budget," amount not the current balance amount.

To (Db):	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	Balances from Page 3			12,256.53	133,282.73	145,539.26
	0122710000000112	580	Mileage	246.51	0.00	246.51
	01 1241 000 22 06 112	211	Group Medical	0.09	18,389.64	18,389.73
	01 1290 000 22 01 112	211	Group Medical	0.09	18,389.64	18,389.73
	01 1290 000 12 12 112	211	Group Medical	0.08	19,026.12	19,026.20
	01 1231 000 12 32 112	230	Retirement	0.02	22,029.46	22,029.48
	01 1290 000 00 00 112	610	General Supplies	63,461.76	21,119.70	84,581.46
	01 1290 000 00 00 112	752	Instructional Equip. Addt'l	17,009.59	6,500.00	23,509.59
	01 1290 000 22 01 112	116	Employee Insurance (opt out)	4,756.53	0.00	4,756.53
	01 1232 000 12 32 112	211	Group Medical	359.88	7,299.96	7,659.84
						0.00
	Balances to Page 5					0.00
	TOTAL DEBITS			98,091.08	246,037.25	344,128.33

Directions: This form is to be submitted by the individual who has "budget oversight responsibility" and the authority to transfer funds in accordance with Board Policy. When it is determined that a specific budget account requires additional funds beyond those originally budgeted to meet approved/planned expenditures, a request may be made to transfer funds from a budget account that has "excess funds" available from what was estimated in the budget. Questions on any requested budget transfers should be forwarded to the Director of Business Services.

CENTRAL OFFICE APPROVAL: _____

John Mead

DATE: 8/23/21

BUDGETARY TRANSFER REQUEST FORM

Warren County School District

Individual Requesting
Transfer of Funds: _____

Date: _____

Building: _____

Budget
Year: _____

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Budget
Request
#1

The amount of funds requested for transfer from this account indicates more funds are available than required this year.

	From(Cr):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	Balances from Page 4			39,382.96	528,939.37	489,556.41
	01 1290 000 22 01 112	230	Retirement	48.10	11,990.68	11,942.58
	01 1211 000 22 04 112	220	Social Security	49.74	341.48	291.74
	01 1290 000 12 12 112	220	Social Security	55.49	1,101.24	1,045.75
	01 1290 000 22 05 112	213	Life Insurance	56.09	144.96	88.87
	01 1232 000 12 32 112	220	Social Security	57.11	1,889.93	1,832.82
	01 1241 000 22 05 112	220	Social Security	57.49	1,889.93	1,832.44
	01 1241 000 12 10 112	220	Social Security	61.24	1,636.41	1,575.17
	01 1290 000 12 32 112	213	Life Insurance	72.48	72.48	0.00
	01 1231 000 12 32 112	220	Social Security	82.44	4,883.38	4,800.94
	Balances to Page 6					
	TOTAL CREDITS			39,923.14	552,889.86	512,966.72

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Budget
Request
#1

The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.

	To (Db):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	Balances from Page 4			98,091.08	246,037.25	344,128.33
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
	Balances to Page 6					
	TOTAL DEBITS			98,091.08	246,037.25	344,128.33

Directions: This form is to be submitted by the individual who has "budget oversight responsibility" and the authority to transfer funds in accordance with Board Policy. When it is determined that a specific budget account requires additional funds beyond those originally budgeted to meet approved/planned expenditures, a request may be made to transfer funds from a budget account that has "excess funds" available from what was estimated in the budget. Questions on any requested budget transfers should be forwarded to the Director of Business Services.

CENTRAL OFFICE APPROVAL: _____

DATE: 8/23/21

BUDGETARY TRANSFER REQUEST FORM

Warren County School District

Individual Requesting
Transfer of Funds: _____

Date: _____

Building: _____

Budget Year: _____

This is the current "budget," amount not the current balance amount.

Budget Request #1

The amount of funds requested for transfer from this account indicates more funds are available than required this year.

From(Cr):	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	Balances from Page 5			39,923.14	552,889.86	512,966.72
	01 1290 000 12 11 112	220	Social Security	101.66	2,282.23	2,180.57
	01 1241 000 22 04 112	212	Group Dental Insurance	103.10	1,127.82	1,024.72
	01 1241 000 22 02 112	220	Social Security	107.67	6,304.03	6,196.36
	01 1290 000 12 11 112	212	Group Dental Insurance	112.50	1,081.86	969.36
	01 1233 000 12 32 112	220	Social Security	120.89	739.02	618.13
	01 1241 000 12 32 112	220	Social Security	120.97	739.02	618.05
	01 1241 000 22 06 112	220	Social Security	122.52	1,478.04	1,355.52
	01 1231 000 12 32 112	212	Group Dental Insurance	134.26	506.28	372.02
	01 1241 000 22 01 112	212	Group Dental Insurance	161.19	506.28	345.09
	01 1241 000 22 01 112	220	Social Security	164.33	4,385.75	4,221.42
	Balances to Page 7					
	TOTAL CREDITS			41,172.23	572,040.19	530,867.96

This is the current "budget," amount not the current balance amount.

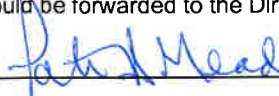
Budget Request #1

The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.

To (Db):	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	Balances from Page 5			98,091.08	246,037.25	344,128.33
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
	Balances to Page 7					
	TOTAL DEBITS			98,091.08	246,037.25	344,128.33

Directions: This form is to be submitted by the individual who has "budget oversight responsibility" and the authority to transfer funds in accordance with Board Policy. When it is determined that a specific budget account requires additional funds beyond those originally budgeted to meet approved/planned expenditures, a request may be made to transfer funds from a budget account that has "excess funds" available from what was estimated in the budget. Questions on any requested budget transfers should be forwarded to the Director of Business Services.

CENTRAL OFFICE APPROVAL:



DATE: 8/23/21

BUDGETARY TRANSFER REQUEST FORM

Warren County School District

Individual Requesting
Transfer of Funds: _____

Date: _____

Building: _____

Budget
Year: _____

Budget
Request
#1

The amount of funds requested for transfer from this account indicates more funds are available than required this year.

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From(Cr):	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
			Balances from Page 6	41,172.23	572,040.19	530,867.96
	01 1211 000 22 04 112	230	Retirement	164.47	1,540.46	1,375.99
	01 2220 000 00 55 112	213	Life Insurance	170.20	8.94	(161.26)
	01 1241 000 22 04 112	220	Social Security	206.35	2,458.93	2,252.58
	01 1241 000 22 02 112	212	Group Dental Insurance	219.30	1,208.43	989.13
	01 1241 000 22 04 112	211	Group Medical Insurance	419.00	32,659.23	32,240.23
	01 1233 000 12 32 112	230	Retirement	450.78	3,333.81	2,883.03
	01 1241 000 12 32 112	230	Retirement	450.83	3,333.81	2,882.98
	01 1290 000 22 05 112	212	Group Dental Insurance	482.31	1,012.56	530.25
	01 1290 000 12 32 112	212	Group Dental Insurance	506.28	506.28	0.00
	01 1241 000 22 04 112	230	Retirement	518.75	11,092.50	10,573.75
			Balances to Page 8			0.00
			TOTAL CREDITS	44,760.50	629,195.14	584,434.64

Budget
Request
#1

The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.

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To (Db):	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
			Balances from Page 6	98,091.08	246,037.25	344,128.33
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
			Balances to Page 8			0.00
			TOTAL DEBITS	98,091.08	246,037.25	344,128.33

Directions: This form is to be submitted by the individual who has "budget oversight responsibility" and the authority to transfer funds in accordance with Board Policy. When it is determined that a specific budget account requires additional funds beyond those originally budgeted to meet approved/planned expenditures, a request may be made to transfer funds from a budget account that has "excess funds" available from what was estimated in the budget. Questions on any requested budget transfers should be forwarded to the Director of Business Services.

CENTRAL OFFICE APPROVAL:
4.12.2017

[Signature]

DATE: 8/23/21

BUDGETARY TRANSFER REQUEST FORM

Warren County School District

Individual Requesting
Transfer of Funds: _____

Date: _____

Building: _____

Budget
Year: _____

Page 8 of 9

This is the current "budget," amount not the current balance amount.

Budget Request #1	From(Cr):		The amount of funds requested for transfer from this account indicates more funds are available than required this year.	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	BUN #	Acct #	Account Description			
			Balances from Page 7	44,760.50	629,195.14	584,434.64
	01 2220 000 00 55 112	220	Social Security	689.70	563.47	(126.23)
	01 1233 000 12 32 112	211	Group Medical Insurance	810.51	9,194.82	8,384.31
	01 1231 000 12 32 112	211	Group Medical Insurance	862.79	14,599.92	13,737.13
	01 1241 000 22 02 112	211	Group Medical Insurance	871.71	17,733.48	16,861.77
	01 1290 000 22 05 112	220	Social Security	1,226.03	2,296.64	1,070.61
	01 1241 000 22 01 112	211	Group Medical Insurance	1,291.98	14,599.92	13,307.94
	01 1290 000 12 32 112	220	Social Security	1,372.47	1,372.47	0.00
	01 1290 000 12 11 112	211	Group Medical Insurance	3,469.51	28,220.94	24,751.43
	01 1290 000 22 05 112	230	Retirement	5,369.38	10,360.40	4,991.02
	01 1290 000 12 32 112	230	Retirement	6,191.36	6,191.36	0.00
			Balances to Page 9			
			TOTAL CREDITS	66,915.94	734,328.56	667,412.62

This is the current "budget," amount not the current balance amount.

Budget Request #1	To (Db):		The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
	BUN #	Acct #	Account Description			
			Balances from Page 7	98,091.08	246,037.25	344,128.33
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
			Balances to Page 9			0.00
			TOTAL DEBITS	98,091.08	246,037.25	344,128.33

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CENTRAL OFFICE APPROVAL: _____
4.12.2017

John D. Mead

DATE: 8/23/21

BUDGETARY TRANSFER REQUEST FORM
Warren County School District

Individual Requesting
Transfer of Funds: _____

Date: _____

Building: _____

Budget
Year: _____

Budget
Request

The amount of funds requested for transfer from this account indicates more funds are available than required this year.

This is the current "budget," amount not the current balance amount.

#1	From(Cr):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
			Balances from Page 8	66,915.94	734,328.56	667,412.62
	01 1290 000 22 05 112	211	Group Medical Insurance	21,562.57	36,779.28	15,216.71
	01 1290 000 12 12 112	212	Group Dental Insurance	58.64	828.72	770.08
	01 1241 000 22 02 112	220	Social Security	107.67	6,304.03	6,196.36
	01 1241 000 22 04 112	220	Social Security	206.35	2,458.93	2,252.58
	01 1290 000 00 00 112	640	TEXTBOOKS & PERIODICALS	1,252.43	2,359.00	1,106.57
	01 1290 000 00 00 112	323	Prof-Serv Other Ed Agency	6,500.00	6,500.00	0.00
	01 2271 000 00 00 112	360	Emp Traing & Dev Service	7,796.09	15,510.00	7,713.91
	01 1290 000 00 00 112	515	Field Trips	11,325.00	11,325.00	0.00
	01 2271 000 00 00 112	580	Training Expenses	15,148.55	15,437.36	288.81
			Balances to Page 10			0.00
			TOTAL CREDITS	130,873.24	831,830.88	700,957.64

Budget
Request

The amount of funds requested for transfer to this account indicates more funds are needed than estimated for this year.

This is the current "budget," amount not the current balance amount.

#1	To (Db):					
	BUN #	Acct #	Account Description	Amount of Transfer Requested	Current Budget Amount	Adjusted Budget After Transfer
			Balances from Page 8	98,091.08	246,037.25	344,128.33
	01 1290 000 00 00 112	610	General Supplies	32,782.16		32,782.16
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
			Balances to Page 10			0.00
			TOTAL DEBITS	130,873.24	246,037.25	376,910.49

Directions: This form is to be submitted by the individual who has "budget oversight responsibility" and the authority to transfer funds in accordance with Board Policy. When it is determined that a specific budget account requires additional funds beyond those originally budgeted to meet approved/planned expenditures, a request may be made to transfer funds from a budget account that has "excess funds" available from what was estimated in the budget. Questions on any requested budget transfers should be forwarded to the Director of Business Services.

CENTRAL OFFICE APPROVAL:
4.12.2017

Patricia Mead

DATE: 8/23/24