



Clint Independent School District  
Budget Transfer Request Form



Date: \_\_\_\_\_

Department / Campus : \_\_\_\_\_

Requested By : \_\_\_\_\_

Cabinet Member Approval: \_\_\_\_\_

Signature: \_\_\_\_\_

The I&S Department is required to approve all transfers for organizations 001 to 106 (campuses) and the appropriate Cabinet member is required for department transfers. Please enter transfers in whole dollars only. Transfers from one function to another will be submitted to the Board of Trustees for approval.

| Item # |      | Fund | Function | Object | Sub Object | Org | Fiscal Year | Program Code | Local Code | Amount |
|--------|------|------|----------|--------|------------|-----|-------------|--------------|------------|--------|
| 1.     | From |      |          |        |            |     |             |              |            |        |
|        | To   |      |          |        |            |     |             |              |            |        |
| 2.     | From |      |          |        |            |     |             |              |            |        |
|        | To   |      |          |        |            |     |             |              |            |        |
| 3.     | From |      |          |        |            |     |             |              |            |        |
|        | To   |      |          |        |            |     |             |              |            |        |
| 4.     | From |      |          |        |            |     |             |              |            |        |
|        | To   |      |          |        |            |     |             |              |            |        |
| 5.     | From |      |          |        |            |     |             |              |            |        |
|        | To   |      |          |        |            |     |             |              |            |        |
| 6.     | From |      |          |        |            |     |             |              |            |        |
|        | To   |      |          |        |            |     |             |              |            |        |
| 7.     | From |      |          |        |            |     |             |              |            |        |
|        | To   |      |          |        |            |     |             |              |            |        |
| 8.     | From |      |          |        |            |     |             |              |            |        |
|        | To   |      |          |        |            |     |             |              |            |        |

Explanation: 1. \_\_\_\_\_

Explanation: 2. \_\_\_\_\_

Explanation: 3. \_\_\_\_\_

Explanation: 4. \_\_\_\_\_

Explanation: 5. \_\_\_\_\_

Explanation: 6. \_\_\_\_\_

Explanation: 7. \_\_\_\_\_

Explanation: 8. \_\_\_\_\_

Business Services Approval: \_\_\_\_\_

Date: \_\_\_\_\_