

Northshore School District ASB Transfer Voucher

School: _____

Date: _____

Transfer From Club/Activity	Description	From Amount (Debit)	Transfer To Club/Activity	Description	To Amount (Credit)
TOTAL FROM				TOTAL TO	

Note: "Transfer FROM" total must equal "Transfer TO" total

Authorizing Signatures:

ASB Bookkeeper: _____

ASB Prime Advisor: _____

ASB Student Authorization: _____

Not required if authorized in Budget or ASB Minutes (please state)

Business Office Use Only

JE Number _____

Date Entered _____