

# Request for Transfer of Funds between Activity Accounts

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

Name of Requestor/Sponsor: \_\_\_\_\_

Signature of Requestor/Sponsor: \_\_\_\_\_

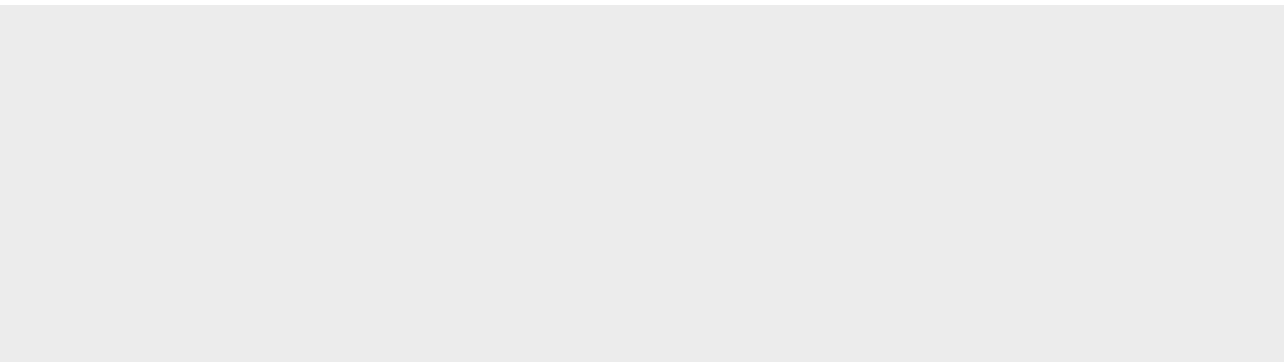
Approval of Supervisor/Principal : \_\_\_\_\_

\_\_\_\_\_  
Move from  
Paying Account Name & No

\_\_\_\_\_  
Move to  
Receiving Account Name & No

Amount to be transferred: \_\_\_\_\_

Reason for Moving funds:



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**TO BE COMPLETED BY DISTRICT ACTIVITY FUND CLERK**

Date Approved by Board of Education: \_\_\_\_\_

*Keep for Audit Records*