

**Gorham School Department
Request to Transfer Funds
Date: _____**

Account To Be Decreased

Account Number: ___ - ___ - ___ - ___ - ___
Account Description: _____
Amount of Transfer: \$ _____

Account To Be Increased

Account Number: ___ - ___ - ___ - ___ - ___
Account Description: _____
Amount of Transfer: \$ _____

Reason for transfer request:

Principal/Department Head

Date

Hollis Cobb, Finance Officer

Date

Ted Sharp, Superintendent

Date

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For Business Office Use Only

Is this transfer within the approved target area? Y/N

If not, what percent is being transferred? _____%

Approved

Denied