

North Salem Central School District
North Salem, NY

REQUEST FOR BUDGETARY TRANSFER

BUDGET YEAR 2022/2023

AMOUNT	FROM: BUDGET CODE	YTD TRANSFER \$\$ For Business Office Use Only	AMOUNT	TO : BUDGET CODE	YTD TRANSFER \$\$ For Business Office Use Only
	BUDGET NAME			NAME	

TOTAL:

\$ - _____

TOTAL:

\$ - _____

REASONS/REMARKS: _____

PREPARED & VERIFIED BY: _____ / _____
Signature Date

(For Amounts over \$5,000)
BOE APPROVAL _____

PURCHASING AGENT _____ / _____ Signature Date	TRANSFERS COMPLETED: _____ / _____ Signature Date
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