CANUTILLO INDEPENDENT SCHOOL DISTRICT

ACTIVITY ACCOUNT TRANSFER REQUEST

TO: Financial Services
Accountants

FROM:

DATE:

SUBJECT: **Transfer of Funds**

Please transfer the following funds: Amount

FROM Acct # _ _ _ - _ _ - _ _ _ _ - _ _ - _ _ _ - _ _ $_____

Club/Organization Name: _____
Sponsor Signature: _____
Club Officer Signature: _____
(Must include Sponsor and Officer Signature when transferring from Activity Accounts)

TO Acct # _ _ _ - _ _ - _ _ _ _ - _ _ - _ _ _ - _ _

Club/Organization Name: _____
Sponsor Signature: _____
Club Officer Signature: _____
(Must include Sponsor and Officer Signature when transferring from Activity Accounts)

Reason/Purpose for the Transfer (this section must be completed include specific details):

Approval Signature: _____
(Must be budget authority, such as Principal or Director)

For further assistance with the form contact Financial Services at 877-7568, 877-7445, or 877-7412.