



Orange County Community College

Appropriation Transfer Form

Transfer Number _____

Reason for Request:

The following transfer of funds is requested:

	Fund	Dept	Expenditure Account	Expenditure Account Title	Amount Requested
From: (-)					
To: (+)					

From: _____

Department Approval _____ Date _____

To: _____

Department (if applicable) _____

Department Approval _____ Date _____

VP Approval _____ Date _____
(For interdepartmental transfers only)

Comptroller _____ Date _____

<input type="checkbox"/>	Approved
<input type="checkbox"/>	Disapproved