



# Clovis Municipal Schools



## Activity Fund Transfer

From:

To:

Activity Name: \_\_\_\_\_

Activity Number: \_\_\_\_\_

Total Transfer Amount \$ \_\_\_\_\_

Purpose of Transfer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **PLEASE ATTACH SUPPORTING DOCUMENTATION WITH APPROVAL**

#### **TRANSFERING SPONSOR:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

#### **TRANSFeree SPONSOR:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved by Finance Official

\_\_\_\_\_  
Date

JOURNAL ENTRY # \_\_\_\_\_ POSTED  
BY \_\_\_\_\_

DATE \_\_\_\_\_