



# HOUSTON INDEPENDENT SCHOOL DISTRICT TRANSFER OF EXPENDITURES REQUEST

DATE: \_\_\_\_\_

TO: \_\_\_\_\_  
(DEPARTMENT HEAD RECEIVING SERVICE WHOSE BUDGET WILL BE CHARGED)

FROM: \_\_\_\_\_  
(DEPARTMENT HEAD PROVIDING SERVICE WHOSE BUDGET WILL BE CREDITED)

This department has provided the following services and/or goods and requests payment in the amount of \$ \_\_\_\_\_ to be credited to the accounts listed below:

	LINE NO.	AMOUNT	G/L ACCOUNT	FUND	COST CENTER	FUNCTIONAL AREA	INTERNAL ORDER	DEBIT / CREDIT
Budget to be charged	01							40
Budget to be charged	02							40
Budget to be credited	03							50
Budget to be credited	04							50

DESCRIPTION OF SERVICE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approved by: \_\_\_\_\_  
(DEPARTMENT RECEIVING SERVICE)

Prepared by: \_\_\_\_\_  
(DEPARTMENT PROVIDING SERVICE)

DOCUMENT ID # \_\_\_\_\_

BY: \_\_\_\_\_