

**Northeastern State University
Budget Transfer Form**

Account Number _____ Date _____

Account Name _____

Budget Transfer Request

Decrease Amount Increase Amount

Personnel:

41113000	Inst Wages	_____	_____
41113300	Matching CWSP Wages	_____	_____
41599000	Professional Serv	_____	_____

Other:

47999000	Operating Expense	_____	_____
42000000	Travel	_____	_____
44000000	Equipment	_____	_____

Explanation or Description:

Account Sponsor Signature

Appropriate VP - (if over \$500)