

OFFICIAL MERCED COMMUNITY COLLEGE DISTRICT FORM

BUDGET TRANSFER REQUEST

FISCAL SERVICES/#2052/REVISED, JANUARY 2022

FOR ASSISTANCE WITH THIS FORM, PLEASE CONTACT LIVETH.BARRAGAN@MCCD.EDU OR (209)384-6267

B0
FISCAL SERVICES USE ONLY

	ACCOUNT NUMBER				DESCRIPTION	DEBIT	CREDIT
	FUND	OBJECT	ACTIVITY	PROGRAM	ACCOUNT NAME OR EXPLANATION	TO (INCREASE)	FROM (DECREASE)
SAMPLE	110	54410	672000	001	GENERAL SUPPLY: FISCAL SERVICES	100	
	110	55210	672000	001	CONF TRAVEL: FISCAL SERVICES		100
					To provide for office supplies		
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
TOTALS							

REQUIRED APPROVALS

<\$500 MANAGERS _____

<\$1,500 DIRECTOR _____

<\$2,000 DEAN _____

<\$5,000 SENIOR DIRECTOR _____

UNLIMITED AVP/VP/PREZ _____

FISCAL SERVICES* _____

* APPROVAL REQUIRED ON ALL REQUESTS

Upon approval of Budget Transfer Request, form can be submitted as follows:

GENERAL FUND LIVETH.BARRAGAN@MCCD.EDU

OTHER FUNDS GRANTS.FISCAL@MCCD.EDU

NOTIFY ME WHEN COMPLETE:

REQUESTOR: _____

EMAIL: _____