Line Item Transfer Request Form

ORGANIZATION INFORMATION

Name of Organization: __________________________________________________________

Requested by: ___________________________________________ E-Mail: __________________________

Phone Number: ( ___ ___ ___ )  ___ ___ ___ - ___ ___ ___ ___ Fund Number: _______ _________

Date Submitted: ________ / ________ / ________

LINE ITEM TRANSFER INFORMATION

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<th>Dollar Amount</th>
<th>From Account Code</th>
<th>To Account Code</th>
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OVERALL TOTAL OF LINE ITEM TRANSFER: $ ____________

COMMONLY USED ACCOUNT CODES

Advertising – 928380  Communications (postage) – 928000  Off Campus Food – 930200  Office Supplies – 931100

Other Supplies – 932300  Printing/Copying – 928170  Rentals - 927000

Other Services (catering, tech services, parking tokens) - 951760

Description of Initial Request (Provide a description of what original request was for):

________________________________________________________________________________________

________________________________________________________________________________________

Description of New Request:

________________________________________________________________________________________

________________________________________________________________________________________

Additional Comments (please use back if necessary):

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Decision of Committee: APPROVED NOT APPROVED Date__________________

Decision of Senate: APPROVED NOT APPROVED Date__________________

SAFC Approval Required: NO YES (only if transfer is $200 or over)

Decision of SAFC (if applicable): APPROVED NOT APPROVED Date__________________

Signature of SAFC Chair (if applicable): __________________________ Date__________________