

FUNDS TRANSFER FORM

(transfers within a department \$4,999 or less)

This instrument has been preaudited in the manner required by the Local Government Budget and Fiscal Control Act.

Finance Officer

DEPARTMENT: _____

DEPARTMENT HEAD SIGNATURE: _____

DATE:

EXPLANATION:

**This budget amendment has been approved by
the appropriate Advisory Board.**

Yes
No

**This instrument has been approved by the
Board of Commissioners as requested.**

County Manager