



ALGONQUIN AND LAKESHORE CATHOLIC DISTRICT SCHOOL BOARD

SCHOOL TRANSFER REQUEST FORM FOR SCHOOL-GENERATED FUNDS

Enter only the amount that you want to increase or decrease the account by. Example : To increase an account from \$100.00 to \$150.00 only show \$50.00 in the Amount column. To decrease an account from \$150.00 to \$100.00 enter -\$50.00 or (\$50.00) in the Amount column. PLEASE ENSURE THAT THE TOTAL IS EQUAL TO "0".

	School Category Name	School Category #	Amount
Transfer from:			
Transfer to:			
PLEASE ENSURE THAT THE TOTAL IS EQUAL TO "0".			Total

Requested by:

Signature

Date

Name (please print)

Title

Authorized by:

School Principal

Date