

**CARTERET COUNTY SCHOOLS**

Form PA-6

**TRANSFER SLIP**

Date Requested \_\_\_\_\_

Amount of Transfer \$ \_\_\_\_\_

Transfer from Account Code \_\_\_\_\_

Transfer to Account Code \_\_\_\_\_

Reason for Transfer \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested By \_\_\_\_\_

Approved By \_\_\_\_\_