

**Bibb County Board of Education
Local School Accounting
Transfer Requisition**

Coast Center 0010

DATE _____

AMOUNT _____

TRANSFER TO _____ ACTIVITY # _____

Transfer In Code _____
 Central Office

TRANSFER FROM _____ ACTIVITY# _____

Transfer Out Code _____
 Central Office

Reason _____

Person Requesting Transfer Signature

Principal Signature

Date Processed (Central Office)

Transferred By (Central Office)