

AGENCY NUMBER	AGENCY BATCH NUMBER	OBJECT CODE HASH TOTAL	TOTAL BATCH AMOUNT	BATCH DATE	BATCH NUMBER	DOCUMENT
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3

AGENCY VOUCHER NUMBER

C.G. WARRANT NUMBER

STATE OF SOUTH CAROLINA

APPROPRIATION/CASH TRANSFER

AGENCY TRANSFERRED TO (CR)

NAME

ADDRESS

AGENCY TRANSFERRED FROM (DR)

NAME

ADDRESS

REASON FOR TRANSFER: \_\_\_\_\_

FROM: \_\_\_\_\_

FM	TRANS CODE	AGCY NO	MINI CODE	SUB-FUND CODE	SUB-SIDIARY ACCOUNT NO	ENCUMBRANCE NO	M O D	PROJECT CODE	P H A S E	AGENCY REFERENCE NUMBER	OBJECT CODE	D E T A I L	TRANSACTION AMOUNT	MULTI-PURPOSE CODE	C G R
<b>TOTAL</b>															

TO: \_\_\_\_\_

FM	TRANS CODE	AGCY NO	MINI CODE	SUB-FUND CODE	SUB-SIDIARY ACCOUNT NO	ENCUMBRANCE NO	M O D	PROJECT CODE	P H A S E	AGENCY REFERENCE NUMBER	OBJECT CODE	D E T A I L	TRANSACTION AMOUNT	MULTI-PURPOSE CODE	C G R
<b>TOTAL</b>															

AGENCIES MUST COMPLETE THIS SECTION

A. TRANSFER FROM PERSONAL SERVICES TO OTHER BUDGET CATEGORIES	YES <sup>**</sup>	<input type="checkbox"/>	NO	<input type="checkbox"/>
B. TRANSFER FROM OTHER BUDGET CATEGORIES TO PERSONAL SERVICES	YES <sup>**</sup>	<input type="checkbox"/>	NO	<input type="checkbox"/>
C. TRANSFER NECESSITATED BY THE APPROPRIATION ACT AND/OR ACTIONS BY THE BUDGET AND CONTROL BOARD	YES <sup>**</sup>	<input type="checkbox"/>	NO	<input type="checkbox"/>

\* APPROVAL REQUIRED BY THE STATE BUDGET DIVISION

REQUESTED BY: \_\_\_\_\_ DATE \_\_\_\_\_ STATE BUDGET ANALYST \_\_\_\_\_ DATE \_\_\_\_\_

STATE BUDGET OFFICER \_\_\_\_\_ DATE \_\_\_\_\_