TEXAS A&M UNIVERSITY - TEXARKANA					
		BUDGET TR	RANSFER REQU	JEST	
Date:				<i>E</i> BJN #	or Accounting Office Use Only
Account Number				Date	
				Recorded by	<u>/:</u>
Account Name				-	
Responsible Person:					
		EXPLA	NATION/TYPE		
BUDGET TR	FROM ACCT:				
		TO ACCT:			
BUDGET TF	RANSFER BE	TWEEN POOLS			
EXPLANATION- attach any	additional doc	rumentation			
	additional doc	Jamentation			
			FROM AMOUNT		TO AMOUNT
BUDGET POOL					
REVENUE POOL	0001				
SALARY POOL	1100				
LONGEVITY POOL	1600				
WAGE POOL	1700				
BENEFIT POOL	1900				
OTHER EXPENSE POOL	3000				
	9600				
INDIRECT COST					_
		Total		Total	
APPROVAL/REVIEW	**Please	e return con	npleted form	to budget@	gtamut.edu**
SOURCE ACCOUNT RESPONSIBLE PERSON: (Or Designee)				DATE:	
BUDGET OFFICE APPROVAL:				DATE:	
Created by:				DATE:	
Orcated by.	-			_ DATE	