University of Wisconsin - Milwaukee
Request for Budget Transfer
Fiscal Year :

Budget Trans. #	

TRANSFER TO

Organization Name			
Fund	Org #	Project/Grant	Program

TRANSFER FROM

Organization Name			
Fund	Org #	Project/Grant	Program

Budget Account		TO - (Debit)	FROM - (Credit)
Salary Permanent	SALPRM		
Unclassified	SALUCL		
Classified	SALCLA		
LTE/STUDENT	LTESTU		
LTE	LTE1		
STUDENT	STUDNT		
Fringe Benefits	FRING1		
S & E	SPEXP1		
Sales Credits	SALCR1		
Capital	CAPEX1		
Special Purpose	SPPUR1		
Financial Aid	FNAID1		
(Other) Specify			
(Other) Specify			
Total Transfer			

Description:(The first 30 characters will appear as the description on WISDM.)

APPROVAL/SIGNATURES

DEAN / DIVISION HEAD	*DATE*
BUSINESS & FINANCIAL SERVICES	*DATE*
Shared Financial System Input Entered By	*DATE*