

FISCAL YEAR 2020-2021 TAX-LEVY BUDGET TRANSFER FORM

DATE: _____

FROM

Department Name: _____

Department Number: _____

<u>OTPS Account Code</u>	<u>Amount</u>	
80120	_____	Supplies & Materials
80121	_____	Travel
80122	_____	Misc. Contractual Services
80123	_____	Equipment Acquisitions
80124	_____	Fringe Benefits
TOTAL	_____	

TO

Department Name: _____

Department Number: _____

<u>OTPS Account Code</u>	<u>Amount</u>	
80120	_____	Supplies & Materials
80121	_____	Travel
80122	_____	Misc. Contractual Services
80123	_____	Equipment Acquisitions
80124	_____	Fringe Benefits
TOTAL	_____	

Explanation: _____

Authorized Signature: _____

Date: _____

NOTE: After completion of this form, please email it to the Budget Office at BudgetOffice@mec.cuny.edu.