

**GUAM DEPARTMENT OF EDUCATION  
NAF- STUDENT ACTIVITY**

**TRANSFER OF FUNDS**

**DATE:** \_\_\_\_\_

**This is to authorize the transfer of funds in the amount of \$** \_\_\_\_\_

**From STUDENT CLUB/ORG** \_\_\_\_\_ **ACCT NO.** \_\_\_\_\_

**to STUDENT CLUB/ORG** \_\_\_\_\_ **ACCT NO.** \_\_\_\_\_

**EXPLANATION: MUST COMPLY WITH YOUR ACTIVITY REQUEST AND MINUTES (Describe who, what, where, when or why.)**

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\_\_\_\_\_  
**Name/ Signature of Releasing Treasurer**

\_\_\_\_\_  
**Name/ Signature of Receiving Treasurer**

\_\_\_\_\_  
**Name/ Signature of Releasing Advisor**

\_\_\_\_\_  
**Name/ Signature of Receiving Advisor**

**APPROVED:** \_\_\_\_\_  
**SCHOOL ADMINISTRATOR**

**TRANSFER COMPLETED ON:**

**Date:** \_\_\_\_\_

**Completed by:** \_\_\_\_\_  
**SCHOOL ADMINISTRATOR/ SCHOOL TREASURER**