

Transfer of Funds Request under Minnesota Laws 2020, Chapter 116/House File 4415, Article 3 Section 8

 Please submit this form with attachments via email to [MDE.UFARS-Accounting@state.mn.us](mailto:MDE.UFARS-Accounting@state.mn.us).

### District Information

District Name: \_\_\_\_\_ District Number: \_\_\_\_\_ District Type: \_\_\_\_\_

Superintendent's Name: \_\_\_\_\_ Fiscal Year: \_\_\_\_\_

Requested Amount of Transfer: \$ \_\_\_\_\_

	Fund	Program Code	Finance Code	Balance Sheet Reserve Account Number	Balance Sheet Reserve Name	Funding Statute
To:						
From:						

Summarize the intended purpose and uses of the transferred funds (Please be specific):

The following must be attached:

- Copy of the board resolution stating the fund transfer must not interfere with the equitable delivery of distance learning or social distancing models.
- Copy of the board minutes documenting adoption of the board resolution (above) and board approval for the transfer of funds in the amount of this application.

### Verification of Information

I hereby verify that the information provided on this form is true and accurate to the best of my knowledge.

Superintendent – Signature \_\_\_\_\_ Date \_\_\_\_\_

Board Chair or Board Designee – Signature \_\_\_\_\_ Date \_\_\_\_\_