

# Worthington Christian Schools, Inc.

## TRANSFER / BACKCHARGE

Date \_\_\_\_\_ JE# \_\_\_\_\_

Name \_\_\_\_\_

Dept. \_\_\_\_\_

Department Head Approval \_\_\_\_\_

Item(s) Description \_\_\_\_\_

Amount \_\_\_\_\_

Account #

From \_\_\_\_\_ To \_\_\_\_\_

Notes: \_\_\_\_\_

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