

 <div> <div>Where ideas work</div> </div>			Inter-Ministry Program / FTE Transfer	
			Control Number	
Initiator Details				
Last Name		First Name		Phone
				Date
Client Organization		Branch		
Transfer From (Initiating Ministry)			Transfer To (Receiving Ministry)	
Client Organization			Client Organization	
Deputy Minister			Deputy Minister	
Last Name		First Name		
Ministry Budget Contact			Ministry Budget Contact	
Last Name		First Name		
		Phone		Phone
Transfer Details				
Vote Number		Program Name		OIC Number
Sub-Vote/Sub-Sub-Vote		Service Line Number		
Service Line Description		Reason for Transfer		
OCG Instructions - Financial Reporting and Advisory Service				
Budget Year				
Transfer Totals				
Please ensure that all dollar amounts are in thousands (\$000) and that FTEs are in whole numbers.				
Fulltime Equivalent (FTEs)				
Operating Expenses				
Gross				
Minus Recoveries				
Sub-Total				
Capital Expenditures				
Financing Transactions				
Receipts				
Minus Disbursements				
Sub-Total				
Revenue				
Commissions				
Doubtful Accounts				
Approvals				
Please enter Initiating Ministry Approver name below:		Please enter Receiving Ministry Approver name below:		Processed by: (TBS use only)
Notes				