## Zapata County

## Line-Item Request Form

Date:				
	Department Name	Line-Item Number	Line-Item Name	Amount
From:				\$
To:				\$
From:				\$
To:				\$
From:				\$
To:				\$
From:				\$
To:				\$
From:				\$
To:				\$
From:				\$
To:				\$
From:				\$
To:				\$
Reason for line-item transfer (please be specific):				

Requested By (please print)

Date Approved

Department Head (signature)