pennsylvania
EMERGENCY MANAGEMENT AGENCY

REQUEST FOR TRANSFER OF EXPENDITURE DGM-20

Subrecipient: _____ **Date:** _____

Justification for Transfer of Expenditure(s)

Select

1) Partial reimbursements require submission of a DGM-07 showing the items to be moved.
2) Please provide the document number associated with the reimbursement.
3) A PO line number must be provided for partial purchase orders.
4) Each row must be checked as either a **P** (partial transfer) or **C** (complete transfer).

Current FFY/Program	Current Project #	Solution Area	Internal Order	C	P	Document Number	Line	Amount	Requested FFY/Program	Requested Project #	Internal Order	PEMA Coding Notes

Subrecipient Approvals ***Programmatic Approval:*** ***Financial Approval:***

Please submit to RA-GrantProgram@pa.gov upon completion.

SAA Approvals

Programmatic Approval: ***Financial Approval:***

Programmatic Comments

Financial Comments

Adjustment Doc	Date Entered