HAMPTON UNIVERSITY Hampton, Virginia 23668

Budget Waiver

	DATE:	
TO:	Doretha J. Spells Vice President for Business Affairs and Treasurer	
FROM: _		
DEPT.: _		
RE:	Request for Budget Adjustment	
Please wai	ve the quarterly allocation for the attached order charged to Budget:	
	Index	
	Fund	
	Organization	
	Program	
	Account	
Specified e	xplanation and justification for the request is as follows:	
Thank you	for your cooperation.	
	Approved, Budget Executive	Date
	Approved, Treasurer	Date