STATE OF HAWAII

ALLOTMENT ADVICE

TO:	ADVICE NO. COMPTROLLER'S NO.										YYYYYYY		
TC	F	YR	APP	D	ALLOT CAT	SOURCE/	ITEM	TITLE AND PURPOSE OF ALLOTI	MENT	M O F	AMOUNT		
XXX	Х	XX	XXX	XX	XX	XXXX	XXXXXX	(20 x)			XXXXXXXXXXX	XX	
								GOVERNOR, STA	GOVERNOR, STATE OF HAWAII				
	DIR	ECTO	R OF	BUD	GET /	AND FIN	ANCE	DATE: _	DATE: STATE ACCOUNTING FORM A-15				