INTERDEPARTMENTAL TRANSFER FORM

Journal Entry Number: _____

Transaction Date: ____/ ____/ _____

Posted By: _____

Fund (6 Digits)	Org. (5 Digits)	Account (6 Digits)	(Optional) Prog. (4 Digits)	Description (35 Character Limit)	Debit (Take Money Away)	Credit (Give Money To)
1						
2						
3						
4						
5						
6						
		HASH TOTAL (Total Debits + Credits)		**TOTAL**		

(Enter FUND or ORG-Not Both)

Provide an Explanation for Interdepartmental Transfer below:

Delivery Instructions:

Department: _____

Room No.: _____

Building: _____

Deliver To: _____

Phone No. _____

Signature Approval:

_____ ____/ ____/ ____
(Approval Signature) (Date)

Received By:

_____ ____/ ____/ ____
(Signature) (Date)

Rev: 6/02/04

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Memorandum

To:

From: Office of the Controller

Phone: 2013(Matt) or 4840(Dan)

Mail: 4531

Date: 9/29/2009

Re: Interdepartmental Transfer Checklist

The following should be used as a checklist before submitting your form. If all lines are checked or verified, your form(s) are processed timely.

___ Copy returned to Controllers Office should say Return to ML 4531.

___ Must contain at least the signature of the Fund/Org accepting the expense.

___ Person who signed must be an authorized signer for the Fund/Org accepting the expense.

___ Must contain a valid Fund number.

___ Must contain a valid Org number.

___ Must contain a valid Account number.

___ Each line should contain **either** Fund or Org number, **never both**.

___ If seeking reimbursement from a Fund or Org, you must provide proper documentation that the original expense was paid by your Fund or Org, i.e. Banner screen print.

___ Must contain a proper description and/or a proper explanation.

___ Must have enough budgeted dollars to cover the expense.

___ If moving "Pool" dollars, a Budget Revision Form must be used