

TRANSFER OF FUNDS
Forward to Financial Accounting Services, Box 4080

Date: _____

Box Number: _____

To: _____

Phone Number: _____

From: _____

	<u>AREA/ORG</u> FUND	<u>RSRC/SREV</u> BACC	AREA/ORG Name	Amount
I. DEBIT	<i>The AREA/ORGNS to be CHARGED:</i>			
Line 1	_____	_____	_____	_____
Line 2	_____	_____	_____	_____
Line 3	_____	_____	_____	_____
Line 4	_____	_____	_____	_____
Line 5	_____	_____	_____	_____
Line 6	_____	_____	_____	_____
Line 7	_____	_____	_____	_____
Line 8	_____	_____	_____	_____
Line 9	_____	_____	_____	_____
Line 10	_____	_____	_____	_____

ORG Manager Signature _____

Total _____

II. CREDIT *The AREA/ORGNS to RECEIVE funds:*

Line 1	_____	_____	_____	_____
Line 2	_____	_____	_____	_____
Line 3	_____	_____	_____	_____
Line 4	_____	_____	_____	_____
Line 5	_____	_____	_____	_____
Line 6	_____	_____	_____	_____
Line 7	_____	_____	_____	_____
Line 8	_____	_____	_____	_____
Line 9	_____	_____	_____	_____
Line 10	_____	_____	_____	_____

ORG Manager Signature _____

Total _____

PURPOSE: _____
