Clear Entries

UNIVERSITY OF CENTRAL FLORIDA
Finance & Accounting
Intra Unit Transfer

I certify that the below charges are true and correct. Supporting documentation is available for audit or review upon request. Destruction of these supporting records must be requested in accordance with UCF Procedure No. 4010. These transactions are subject to reversal if the charges or buying organization disputes the charges.

Signed: _____ Ext.
Authorized Department Representative.

Printed Name: _____

Date: _____

Description: _____

Charge or Buying Organization						Benefitting Organization					
DEPT/PROJ NAME	DEPT	PROJ	ACCT	BUD REF	AMOUNT	INVOICE	DEPT/PROJ NAME	DEPT	PROJ	ACCT	BUD REF

F&A Form 41-910 (7/03)

Totals don't add up automatically. Use the Excel version to auto-add totals.