

# UNIVERSITY OF SOUTH ALABAMA EXPENSE TRANSFER REQUEST

[ This form is to be used to transfer expenditures from one FOAPAL account ( fund, organization, account ) to another FOAPAL account ]

DATE: \_\_\_\_\_

TO: BUSINESS OFFICE

FROM: \_\_\_\_\_  
(ORGANIZATION NAME)

PREPARED BY: \_\_\_\_\_

DOC#:

( For Business Office Use )

TRANSFER EXPENDITURE(S) FROM ACCOUNT : (CR)					( F O A P required)			
SEQ	FUND	ORGN	ACCT	PROG	ACTV	LOCN	DESCRIPTION ( MAX 35 CHARACTERS )	AMOUNT
1	_____	_____	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____	_____	_____	_____
<b>TOTAL TRANSFER FROM:</b>							_____	_____

TRANSFER EXPENDITURE(S) TO ACCOUNT : (DR)					( F O A P required)			
SEQ	FUND	ORGN	ACCT	PROG	ACTV	LOCN	DESCRIPTION ( MAX 35 CHARACTERS )	AMOUNT
1	_____	_____	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____	_____	_____	_____
<b>TOTAL TRANSFER TO:</b>							_____	_____

PURPOSE: \_\_\_\_\_

\_\_\_\_\_

SIGNED	DATE	DEAN	DATE
DEPARTMENT HEAD, DIRECTOR, OTHER	DATE	CONTROLLER	DATE

BUSINESS OFFICE	CODED BY: _____	REVIEWED BY: _____	RULE CODE: _____
USE ONLY:	APPROVED BY: _____	ENTERED BY: _____	DOCUMENT #: _____
<b>DOCUMENT TOTAL:</b>			_____