

Teachers College, Columbia University
DEPARTMENTAL REVENUE/EXPENSE TRANSFER FORM

Please complete information on this transfer request and submit it to the Budget Office (175 Grace Dodge, **Box 30**). Supporting documentation must be included. The more information provided the faster the request may be processed.

Request for Revenue or Expense Transfer (Journal Entry)

Department _____ Date of request ____/____/____
Department Extension _____ TC Box # _____

FOR TRANSFER OF ACTUAL REVENUE OR EXPENDITURES ONLY
(Please attach explanation for transfer request)

(1) Transfer Charge	From: Index _____	Acct. _____	Amt. \$ _____
	To: Index _____	Acct. _____	Amt. \$ _____
(2) Transfer Charge	From: Index _____	Acct. _____	Amt. \$ _____
	To: Index _____	Acct. _____	Amt. \$ _____
(3) Transfer Charge	From: Index _____	Acct. _____	Amt. \$ _____
	To: Index _____	Acct. _____	Amt. \$ _____
(4) Transfer Charge	From: Index _____	Acct. _____	Amt. \$ _____
	To: Index _____	Acct. _____	Amt. \$ _____
(5) Transfer Charge	From: Index _____	Acct. _____	Amt. \$ _____
	To: Index _____	Acct. _____	Amt. \$ _____

Explanations/Comments

(1) _____

PREPARED BY _____ Extension _____
Employee requesting the expense transfer

AUTHORIZED SIGNATURE (S) _____ 2nd Dept. _____
If applicable: Authorization from department that is being charged is also required

FOR BUDGET OFFICE USE ONLY

Comments: _____

Journal Type

Reviewed by _____ Date ____/____/____

Correcting JV #

The corrections (journal) will be reflected on the _____ Reports.