

Expense Transfer Request

Authorized by (Requesting Dept): _____

Date: _____

Approved by(Receiving Dept): _____

Date: _____

FROM

<i>Fund</i>	<i>Campus</i>	<i>Dept.</i>	<i>Object</i>	<i>Area</i>	<i>Amount</i>	<i>Reference</i>

TO

<i>Fund</i>	<i>Campus</i>	<i>Dept.</i>	<i>Object</i>	<i>Area</i>	<i>Explanation</i>

Total:

NOTE: ALL relevant supporting documentation must be attached. If the Department receiving this transfer is **NOT** under your authority, the receiving Budget Manager **MUST** approve this transfer.

If you have any questions, please call Melissa Saddlemire at extension 4733.
Send Expense Transfer Requests to Fiscal Services, LAC Room 70 or,
Email to: saddlemire@maryu.marywood.edu, jmoliver@maryu.marywood.edu
Thank you.