

The University of Alabama in Huntsville

TRANSFER AUTHORIZATION

TRANSFER COST:

DATE: _____

TO:

BUDGET UNIT TO BE CHARGED

INDEX NUMBER - ACCOUNT CODE

FROM:

BUDGET UNIT TO BE CREDITED
Office of Professional and Continuing Education (OPCE)

INDEX NUMBER - ACCOUNT CODE
220329-7515

QUANTITY	DESCRIPTION	Unit Price	Total Amount
	Order #		\$ -
			\$ -
			\$ -
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			\$ -
			\$ -
			TOTAL

Approvals

<p>I certify that:</p> <ul style="list-style-type: none"> - the expenses indicated hereon were incurred by me in the performance of official University of Alabama in Huntsville business pursuant to authority granted to me. - I have not been and will not be reimbursed for any of these expenses by any other entity - there are no alcoholic beverages included in these expenses - I agree to the rate at which I am being reimbursed - this voucher has been completed in compliance with University of Alabama in Huntsville policies and no expenses included herein have been previously submitted. 		
<p>_____</p> <p>Printed Name</p>	<p>sign -----></p>	<p>_____</p> <p>Budget Unit Charged</p>
		<p>_____</p> <p>Date</p>

<p>_____</p> <p>Fathia Hardy Printed Name</p>	<p>sign ----></p>	<p>_____</p> <p>Budget Unit Credited</p>
		<p>_____</p> <p>Date</p>
<p>_____</p> <p>Printed Name</p>	<p>sign -----></p>	<p>_____</p> <p>Contracts & Grants Accounting (Required if contract or grant)</p>
		<p>_____</p> <p>Date</p>
<p>_____</p> <p>Printed Name</p>	<p>sign -----></p>	<p>_____</p> <p>Accounting & Financial Reporting</p>
		<p>_____</p> <p>Date</p>