



Cash & Expense Transfer Requests

Date: _____ Cost Center: _____

Department Name: _____

Transfer from (Debit) the following UGA Foundation accounts:

Account Name	Cost Center	Account Number	Ledger Acct (Foundation use only)	Amount
			Total	

Transfer to (Credit) the following UGA Foundation accounts:

Account Name	Cost Center	Account Number	Ledger Acct (Foundation use only)	Amount
			Total	

☐ Increase budget within scholarship universe.

Business Purpose: _____

Send Email Confirmation: ☐ yes ☐ no Contact Email: _____

Send Email Confirmation: ☐ yes ☐ no Contact Email: _____

Submitted by: _____ Phone: _____

Signature Authority Approval: _____ Date: _____

For transfers to endowed gifts, transfers of less than \$5,000.00 will be moved to the spendable side unless otherwise indicated.