

REQUEST FOR TRANSFER FORM

- ❖ Transfer expenses that are charged to:
 - UWRF Department Name:
 - UWRF Department Account Number:
 - Amount of Transfer: \$
 - Explanation of Transfer:
- ❖ Please provide further information regarding your request by attaching:
 - A journal entry detail from WISDM
 - The detail should include the accounting string, vendor, date and dollar amount for each charge to be reimbursed
 - Receipts of supplies and expenses to be reimbursed
 - A copy of your award letter

Transfer Requested By:

Print Name

Signature

Date

*Please make a copy for your records and send the completed form with the required documents to the
URSCA Office in 235 Rodli Hall.*

OFFICE USE ONLY:**Transfer Approved by URSCA Representative:**

Signature

Date

Transfer Expenses to: