

**UNIVERSITY OF LOUISVILLE
FORM FOR INTRA-UNIVERSITY TRANSFERS
(No Checks Will Be Issued From This Form)**

Date: ___ / ___ / ___

**Dept. Transfer # _____

CHARGE CONTACT # _____ PRINTED NAME _____

SPEED TYPE	ACCOUNT	AMOUNT	SIGNATURE

DESCRIPTION 30 Characters Maximum _____

CREDIT CONTACT # _____ PRINTED NAME _____

SPEED TYPE	ACCOUNT	AMOUNT	SIGNATURE

DESCRIPTION 30 Characters (Maximum) _____

Full Description (CK#, PO#, EJE#, ETC.):

CONTROLLER' OFFICE AUTHORIZATION

****INSTRUCTIONS:** Department initiating transfer **MUST ASSIGN** the Dept. Transfer # consisting of the first four letters of your department plus a three-digit number beginning with 001 and ending at 999 (i.e. Accounting Department: ACCO001).

ROUTING:

- Step 1: Department receiving credits initiates the IUT miniform and mails to department receiving chare.
- Step 2: Department receiving charge will complete the IUT miniform and forward the IUT to the Program Asst. in the Financial Administration Sponsored Programs.