



**FLORIDA INTERNATIONAL UNIVERSITY**

Controller's Office ▪ Modesto A. Maidique Campus CSC 310 ▪ Miami, FL 33199

**CASH TRANSFER REQUEST FORM**

| Controller's Office Use ONLY |             |
|------------------------------|-------------|
| Journal Date:                | Journal ID: |
|                              |             |

|       |
|-------|
| Date: |
|       |

| Department Requesting Cash Transfer Information: |              |           |
|--|--------------|-----------|
| Preparers Name:                                  | Panther ID:  |           |
| E-Mail:  | Room Number: |           |
| Department Name:                                 |              |           |
| Departmental Authorization:                      | Print Name   | Signature |
| Preparers Phone Extension:                       | Fax Number:  |           |

|                                  |  |
|----------------------------------|--|
| <b>Purpose of Cash Transfer:</b> |  |
|----------------------------------|--|

**Cost Center**

| Charge Activity Nbr Accounting Information |                 |           |      |             |              |              |
|--|-----------------|-----------|------|-------------|--------------|--------------|
| Activity Nbr:                              | Activity Title: | Cost PID: | Task | Budget Ref: | GL Account # | Debit Amount |
|  |                 |           |      |             |              |              |
|  |                 |           |      |             |              |              |
|  |                 |           |      |             |              |              |
|  |                 |           |      |             |              |              |
|  |                 |           |      |             |              |              |

| Benefitting Activity Nbr Accounting Information |                 |           |      |             |              |               |
|---|-----------------|-----------|------|-------------|--------------|---------------|
| Activity Nbr:                                   | Activity Title: | Cost PID: | Task | Budget Ref: | GL Account # | Credit Amount |
|   |                 |           |      |             |              |               |
|   |                 |           |      |             |              |               |
|   |                 |           |      |             |              |               |
|   |                 |           |      |             |              |               |
|   |                 |           |      |             |              |               |

Notes: A cash transfer should NOT be recorded between an agency fund (ex. 491 489, 064, 074) and a non-agency fund (ex. 331, 333, 334, 335, 471, 472, all 6XX, and all 7XX). Additionally cash transfers are not allowed To or From E&G Funds in the 2xx range.