

REGENT UNIVERSITY TRANSFER OF ACTUAL EXPENSES FORM

TO: KARON LOCHER, BUSINESS OFFICE ADM 134

FROM:

COPY TO:

SUBJECT:

DATE:

This transfer is being issued for:

Event: _____

Event Date: _____

Description: _____

Vendor: _____

What was the Original Mode of Payment, if applicable (Check one):

____ Check Check Date _____

____ Credit Card (CC) CC Trans. Date _____ Cardholder Name _____

Check credit card if an expense was charged on the Regent credit card and requires transferring charges to a different code than what was originally charged.

Please Charge \$ _____ **to Account Code:** _____ - _____

Authorized Signature: _____ **Date:** _____

Please Credit \$ _____ **to Account Code:** _____ - _____

Authorized Signature: _____ **Date:** _____

Please scan and email the completed form back to the Business Office at Accounting@regent.edu. Or return completed form to the Business Office ADM 134.