

INTERDEPARTMENTAL INVOICE

INVOICE NO.

Request/Approval for Goods/Services

Forward Completed Copy To: _____

From: _____

DEPARTMENTAL APPROVAL:

Prepared by _____ Date _____

Authorized by _____ Date _____

Item No.	Description	Quantity	Unit of Measure	Unit Price	Extended Price
1					
2					
3					
4					
5					
6					
7					
8					
9					
TOTAL					

Accounting Information

Shaded Areas for Accounting Services Use Only

Transaction Date:	Document #:	Type:	Document Total (Hash):	Hash Check
		JE16		

COA	Credit Index/Fund	Account	Amount	D/C	Description / Invoice #
G				C	

NSF

COA	Debit Index/Fund	Account	Amount	D/C	Description / Invoice #
G				D	
↓				D	
↓				D	