FOR FINANCIAL SERVICES USE ONLY

JE No. _____

Short Desc._____ **JE Type** _____

JE Ref. _____ **Ref. 3** _____

JOURNAL ENTRY FORM

Date _____

Note: Financial Services will be unable to process journal entries without authorizing signatures or complete backup.

USE THIS FORM:

For all activity (60) account transactions.
To move an expense between operating GL accounts.
To move an expense charged to the wrong GL account.

GENERAL LEDGER ACCOUNT NUMBER	DEBIT AMOUNT	CREDIT AMOUNT	DESCRIPTION
- - - -			
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- - - -			
- - - -			
- - - -			
TOTAL	$ -	$ -	

Prepared By: _____

Date: _____

Coordinator, Director or Principal Approval:_____

Date: _____

Accounting Mgr:_____

Date: _____

Comptroller:_____

Date: _____

rev 4/07