THE UNIVERSITY OF MEMPHIS®

# Authorization to Credit Cash Receipts to Expenditure Accounts

Click here for online help.

## *TO BE COMPLETED BY CUSTOMER:*

☐ SINGLE OCCURRENCE REQUEST or ☐ BLANKET REQUEST

Department: _____

| FUND | ORGN | ACCT | PROG | ACTV | LOCN |
|---|---|---|---|---|---|
| | | | | | |

Amount of Request: $ _____ (NOTE: Only indicate amount for special, one-time credits.)

Source of Monies:

| Name on Check* | Amount |
|---|---|
| | |
| | |
| | |

* Attach additional sheets if necessary.

Brief Explanation:

Department Name:

Requested By: _____ Email/EXT: _____

Requester's Signature: _____ Date: _____

## *FOR ACCOUNTING OFFICE USE ONLY:*

_____

Signature of Approver Date

## *FOR BURSAR'S OFFICE USE ONLY:*

_____

Cashier Receipt Number Date

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