

THE UNIVERSITY OF TEXAS RIO GRANDE VALLEY

INTER-DEPARTMENTAL TRANSFER VOUCHER

IMPORTANT: Before beginning the IDT process, please ensure you have obtained **Pre-Approval** from Planning & Analysis.

Date Vouchered:	Departmental Reference Number *:	
Project/Cost Center to Pay Charge:	Expense Account No:	
Project/Cost Center to Pay Charge: Expense Account No.: Project/Cost Center to Receive Credit: Revenue Account No.:		
* (Optional) Assign a unique 4-digit reference number to assis		
DESCRIPTION OF SERVICES AND CHARGE RATE AMOUNT		
	TOTAL	
I certify that the above charges are true, correct and unpaid.	APPROVAL OF CHARGES: I Certify that the above services were rendered, or go correspond in every particular with the contract under that the invoice is true and unpaid	oods received; and that they er which they were procured and
Supplier Signature: Print Name: Date	e User Signature: Print Name:	Date
Cost Center/Project Manager/ Alternate Approver Signature:	Cost Center/Project Manager/ Alternate Approver Signature:	
Print Name: Date		Date

Approving departments should keep their own copy as they make their approval. Additional copies will not be distributed by Accounting & Reporting.