SOFC Transfer Request

Student Organization Name:

Account Number | Sub-Account | Date (mmddyyyy)

SOFC Use Only	
Approval:	
Trans #:	
Date:	

Transaction Information

TO Account Name	**To** Account Number	Amount	SOFC Use Only
	-		Object Code
FROM Account Name	**FROM** Account Number		
	-		Object Code

Reason for Transfer:

I certify that this money was used as outlined and that **NO ALCOHOLIC BEVERAGES** *are included in this purchase.*

Privacy Policy "State law requires that you be informed of the following (1) you are entitled to request to be informed about the information about yourself collected by the use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you."

Student Organization Leader Signature	
Phone:	Date:
Faculty / Staff Advisor Signature	
Phone:	Date:
SOFC Signature(s) as needed	
Phone:	Date:

SOFC Notes

Student Organization Finance Center *235 Koldus Student Services Building Mail Stop 1236 College Station, TX 77843-1236 (979) 845-1114*

Services of the Student Organization Finance Center are supported by the University Advancement Fee