Finance Office College Hall, Room 108 Extension 5299 Fax (202) 448-6920

## **GALLAUDET UNIVERSITY** INTERDEPARTMENTAL INVOICE

Today's	OPTIONAL tracking	
Date	number-up to 8	
	characters	

DEPARTMENT REQUESTING SERVICE		DE	DEPARTMENT PROVIDING SERVICE			
Department Name			Department Name			
Building an	d		Building and			
Room Numl			Room Number			
Requested		Ext	Delivered		Ext	
Ву			Ву			
DESCRIPTION OF			IPTION OF SERVICES		AMOUNT	
(UP TO 30 CH YOUR	TANSACTION, ENTER THE DE HARACTERS) YOU WANT TO T FINANCIAL REPORT.					
				TC	TAL	
CHARGE TO			CREDIT TO			
Department	Expense Account	Amount	Department	Expense Account	Amount	
Approved By/Date			Approved By/Date		1	
	Interdepartmental	Invoices requests n	nust be approved in accorda	nce with policy 2.02.		

Appropriate documentation must be attached.

FINANCE OFFICE USE ONLY		
Processed by:	Date:	