



## SOUTH TEXAS COLLEGE Interdepartmental Transfer (IDT) - Revenue

<b>Business Office Use Only:</b>			
Document: _____ IDT: _____	Budget Approval: _____ Date: _____		
<table border="1" style="margin: auto;"> <tr> <td style="padding: 5px;">Document Total</td> <td style="text-align: center; padding: 5px;">-</td> </tr> </table>	Document Total	-	Grants Approval: _____ Date: _____
Document Total	-		
Date: _____ Entered by: _____			

**Do not use revenue Interdepartmental Transfer Form (IDT) for:**

- \*Budget transfers
- \*Expenditure transfer between organizations
- \*Correction of an error
- \*To make a profit

**Provider Account (to received)**  
Credited Department \_\_\_\_\_

Fund	Organization	Account	Program

(Credit)

Description of Conference/ Event	Amount
Conference/Event name:	
Conference/Event date:	
Conference/Event registration fee:	
Name(s) of staff attending the conference/event:	
<b>GRANTS:</b>	
Course name:	
Course start date:	Course end date:
Tuition amount:	
Student name(s):	
Total	
	-

**Customer Account (to pay)**  
Charged Department \_\_\_\_\_

Fund	Organization	Account	Program

(Debit)

Provider Department

Customer Department

I certify that the above charges are true, correct, and paid.

Approval of Charge:

I certify that the above services were rendered, or goods received; and that they correspond in every particular with the contract under which they were procured and that the invoice is true and paid.

Prepared By (Printed name and please initial) \_\_\_\_\_ Date \_\_\_\_\_

Prepared By (Printed name and please initial) \_\_\_\_\_ Date \_\_\_\_\_

Financial Manager (Printed Name) \_\_\_\_\_ Date \_\_\_\_\_

Financial Manager (Printed Name) \_\_\_\_\_ Date \_\_\_\_\_

Financial Manager Approval Signature \_\_\_\_\_ Date \_\_\_\_\_

Financial Manager Approval Signature \_\_\_\_\_ Date \_\_\_\_\_

Distribution:  
Original - Business Office  
Copy - Provider and Customer Department