



Transfer of Custody Form

Deposit Type Cash Amount
 Check #

Individual or Company that Deposit is from

Received by Date Received

Account to be Deposited in

Purpose of Deposit

Please attach any related backup.

Transfer of Custody

From Dept/Center

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Printed Name

Signature

Date

To Business Office

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Printed Name

Signature

Date

BUSINESS OFFICE USE ONLY

Date Sent for Processing IDT #

Sent to Cashier Development Foundation FMO (Reduction to Expense)

Comments

Date Posted to Account

Reconciler Signature