



MOU WORKSHEET
BETWEEN AN AUXILIARY CORPORATION
AND A CAMPUS ENTITY
FY: _____

MUST BE ATTACHED TO ALL MOUs:

Please attach a copy of this completed and signed MOU Worksheet with each invoice submitted to Accounts Payable. Invoices for payment should not be submitted prior to request for services. Invoices submitted for payment without the MOU Worksheet attached may cause a delay in payment.

REVENUE: AUXILIARY SERVICE PROVIDER

ACCOUNT: _____ FUND: _____ DEPT ID: _____ PROGRAM: _____ CLASS: _____ PROJECT: _____ AMOUNT: \$ _____

ACCOUNT: _____ FUND: _____ DEPT ID: _____ PROGRAM: _____ CLASS: _____ PROJECT: _____ AMOUNT: \$ _____

Note: Auxiliaries should use Auxiliary chartfields. Complete the worksheet for **all** lines that are specified in this MOU. Attach additional pages as necessary.

Financial Approver: _____ **Print Name:** _____ **Date:** _____

Department Contact: _____ **Ext:** _____ **Email:** _____

EXPENSES: CAMPUS SERVICE RECIPIENT

ACCOUNT: _____ FUND: _____ DEPT ID: _____ PROGRAM: _____ CLASS: _____ PROJECT: _____ AMOUNT: \$ _____

Financial Approver: _____ **Print Name:** _____ **Date:** _____

Department Contact: _____ **Ext:** _____ **Email:** _____

MOU Number _____

(For Auxiliaries use only)

DO NOT SEND TO FINANCIAL SERVICES