



JOURNAL ENTRY REQUEST FORM

University Hall 360
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Fax: (818) 677-2840
Mail Code: 8334

Reference No.: _____ (Optional)

Reason for Journal Entry (JE): _____

EXPENDITURE BEING TRANSFERRED FROM/OR REVENUE TRANSFERRED TO (CREDITS):

LINE	ACCOUNT	FUND	DEPT ID	PROGRAM	CLASS	PROJECT/GRANT	AMOUNT	FTE	DESCRIPTION
1.	_____	_____	_____	_____	_____	_____	\$ _____	_____	_____
2.	_____	_____	_____	_____	_____	_____	\$ _____	_____	_____
3.	_____	_____	_____	_____	_____	_____	\$ _____	_____	_____
4.	_____	_____	_____	_____	_____	_____	_____	_____	_____

TOTALS: \$ _____

EXPENDITURE BEING TRANSFERRED TO/OR REVENUE TRANSFERRED FROM (DEBITS):

LINE	ACCOUNT	FUND	DEPT ID	PROGRAM	CLASS	PROJECT/GRANT	AMOUNT	FTE	DESCRIPTION
1.	_____	_____	_____	_____	_____	_____	\$ _____	_____	_____
2.	_____	_____	_____	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____	\$ _____	_____	_____

TOTALS: \$ \$ _____

Prepared by: _____ Financial Approver: _____

Print Name: _____ Ext: _____

NOTE: Please provide proper documentation as appropriate (*PEAS reports, MOU, MOU Worksheets, ledger balance reports, etc.*). If documentation is not included as noted, the request form will be returned. FTE must be completed for salary expenditures (1.0 FTE is equivalent to one month's full time salary).