AUBURN UNIVERSITY Accounts Receivable Charge Form

	Student Financial Services – Cashier Department										JOURNAL NO					
From:	DEPARTMENT								DATE VOUCHER PREPARED BY DEPT			DATE:				
ADDRESS									TERM							
Debit						In al					Credit					
Fund	Org	Acct	Prog	Actvty	Locatn	Jrnal Type	DESCRIPTION		AMOUNT	Fund	Org	Acct	Prog	Actvty	Locatn	
			1				TOTAL									
EXPL	ANATION:															
									PREPARED	RV			<u>D</u> A	ATE		
									Signature of Unit Head				DA	DATE		
													В	O 45-01 (RF	EV 05/11-B)	