

# INTERAGENCY TRANSFER INVOICE

<b>SUPPLIED BY:</b> CREDIT		<b>SUPPLIED TO:</b> CHARGE	
AGENCY	CODE	AGENCY	CODE
ADDRESS		ADDRESS	
INVOICE NUMBER	DATE (MM/DD/YYYY)	SHIPPED TO	
REQUISITION NUMBER		AGENCY REFERENCE NO.	

DATE OF DELIVERY OR SERVICE	DESCRIPTION OF ARTICLES OR SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT

NOTE:  SECTION 9 OF THE COMMONWEALTH POLICIES AND PROCEDURES MANUAL LISTS TRANSACTION CODES AUTHORIZED FOR USE ON THIS DOCUMENT.	I Certify that this voucher is in agreement with the merchandise or service for which payment is being made: and further, that computations and coding on the voucher are correct and discounts taken are proper.  Initial _____	<b>VOUCHER NUMBER</b>	<b>DATE (MM/DD/YY)</b>
	<b>TOTAL THIS SHEET</b>		0.00
	<b>TOTAL SHEET 2</b>		0.00
	<b>TOTAL SHEET 3</b>		0.00
	<b>TOTAL SHEET 4</b>		0.00
	<b>AMOUNT CERTIFIED FOR PAYMENT</b>		0.00

TRANS	AGENCY	GLA	FUND		FFY	PROGRAM			OBJECT	REVENUE SOURCE	AMOUNT	PROJECT		
			FUND	DET		PROG	SUB	ELE				PROJECT	TK	PH

  

COST CODE	FIPS	PSD	AGENCY REFERENCE	INVOICE		DUE DATE	REFERENCE DOC	
				DATE	NUMBER		MM DD YY	NUMBER

  

DESCRIPTION	CURRENT DOCUMENT		SUBSIDIARY ACCOUNT	MULTI-PURPOSE
	NUMBER	SX		

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