

BURSAR DEPOSIT CHANGE FORM

SOUTHERN ILLINOIS UNIVERSITY CARBONDALE

Transaction Information: All fields must be completed.

*Please attach a copy of the collection report.

What is the budget purpose as it was entered? _____

What is the correct budget purpose? _____

What is the AIS object code as it was entered? _____

What is the correct AIS object code? _____

What is the date of the transaction?
(Date entered by Bursar) _____

What is the transaction number?
(Found on the Funds Available - Report of
Transactions. Example: **009-0201003000-123**)
_____ - _____

What is the amount of the transaction? _____

Contact Information:

Contact Name

Department

MailCode

Email

Phone Number

Fiscal Officer/Delegate Signature

Date

Obtain the Fiscal Officer or Delegate's signature, attach a copy of the collection report, and mail the completed form and attachment to:
Accounting Services Office, Mail Code 6812