HOBART AND WILLIAM SMITH COLLEGES

Journal Entry Form

Email completed form to Stefanie Newcomb in the Business Office (snewcomb@hws.edu)

Created By: _____ Date _____

Department: _____ Extension: _____

Description: _____

List below the exact accounting string to charge (debit) and relieve (credit) for this Journal Entry*:

Account	Fund	Department	Program	My Ref	Debit	Credit
XXXXX	XX	XXXXX	XXXXX	XX		
					$ 0.00	$ 0.00

Columns must equal

* Completion of Acct-Fund-Dept-Program information above in their entirety is required for processing.
* Supporting documentation should be included with this form (email authorization, invoice/voucher #).
* Please allow 3-5 business days for processing.

_____

Authorized Signature