

PRINCETON UNIVERSITY
INTERDEPARTMENTAL INVOICE (II)

TODAY'S DATE _____

II NUMBER: I

QUESTIONS DIRECTED TO (INCL. PHONE#)

MONTH PROCESSED _____

DESCRIPTION (REASON FOR II TRANSACTION - PLEASE EXPLAIN IN DETAIL)
Also, please complete the "Report Line Description" fields below

CHARGES/CREDITS (number of digits for each field indicated in parentheses)

CHARGES (amounts removed from the project/grant)

AMOUNT	ACCT (3)	DEPT (3)	PROJECT GRANT (7)	FUND (2)
Controller Use Only		REPORT LINE DESCRIPTION (22)		
OPTIONAL 1 (15)		OPTIONAL 2 (15)		

CREDITS (amounts added to the project/grant)

AMOUNT	ACCT (3)	DEPT (3)	PROJECT GRANT (7)	FUND (2)
Controller Use Only		REPORT LINE DESCRIPTION (22)		
OPTIONAL 1 (15)		OPTIONAL 2 (15)		

AMOUNT	ACCT (3)	DEPT (3)	PROJECT GRANT (7)	FUND (2)
Controller Use Only		REPORT LINE DESCRIPTION (22)		
OPTIONAL 1 (15)		OPTIONAL 2 (15)		

AMOUNT	ACCT (3)	DEPT (3)	PROJECT GRANT (7)	FUND (2)
Controller Use Only		REPORT LINE DESCRIPTION (22)		
OPTIONAL 1 (15)		OPTIONAL 2 (15)		

AMOUNT	ACCT (3)	DEPT (3)	PROJECT GRANT (7)	FUND (2)
Controller Use Only		REPORT LINE DESCRIPTION (22)		
OPTIONAL 1 (15)		OPTIONAL 2 (15)		

AMOUNT	ACCT (3)	DEPT (3)	PROJECT GRANT (7)	FUND (2)
Controller Use Only		REPORT LINE DESCRIPTION (22)		
OPTIONAL 1 (15)		OPTIONAL 2 (15)		

AMOUNT	ACCT (3)	DEPT (3)	PROJECT GRANT (7)	FUND (2)
Controller Use Only		REPORT LINE DESCRIPTION (22)		
OPTIONAL 1 (15)		OPTIONAL 2 (15)		

AMOUNT	ACCT (3)	DEPT (3)	PROJECT GRANT (7)	FUND (2)
Controller Use Only		REPORT LINE DESCRIPTION (22)		
OPTIONAL 1 (15)		OPTIONAL 2 (15)		

_____ TOTAL CHARGES (1)

_____ TOTAL CREDITS (1)

CHARGE APPROVAL SIGNATURE: _____
DEPARTMENT BEING CHARGED

(1) TOTAL CHARGES MUST EQUAL TOTAL CREDITS
SHADED AREAS TO BE COMPLETED BY CONTROLLER'S OFFICE

For instructions to complete this form, go to: