



Rensselaer

Financial Transaction Request

DATE:

TO: ☐ **Research Administration & Finance (POSTAWARD_RAF@rpi.edu)** - FTRs including restricted funds, recharge center charges

☐ **Financial Reporting (Accounting@rpi.edu)** - other FTRs

☐ **Property Administration (kaczom@rpi.edu)** - FTRs with equipment charges (17X's)

☐ **Financial Planning/Budget (grzymh@rpi.edu)**

FROM: _____
(Organization)

RE: ☐ Internal Billing/Recharge center billing - **Please note: Transactions older than 180 days will not be processed.**

☐ Cost Transfers for Restricted A & B Funds - **Must use RAF's Non-Salary Cost Transfer Form**

☐ Record Funds Transfer

☐ Correct Prior Transaction - **Please note: Transactions older than 90 days will not be processed.**
Please see Campus-wide FTR Policy for restrictions.

Please record transactions as indicated below (ALL FIELDS ARE REQUIRED IF CORRECTING A PRIOR TRANSACTION.):

Fund	Org	Acct**	Prog	Actv	Amount	Debit/ Credit*	Document #	Description include initial Banner info (vendor name, etc.)	Date of original transaction

Please do not put more than 12 transactions on a page. **0.00** *Indicate debit or credit for each line

*****BE SURE TO INCLUDE BANNER OR BRIO BACKUP FOR EACH TRANSACTION WHEN CORRECTING PRIOR TRANSACTIONS*****

Explanation for Request:

FOAPAL

Requester PRINTED Name (required)	Phone (required)	Date	Fund	Funding source (6 digit)
			Organization	Organization code (4 digit)
			Account	Expense or revenue code (3 digit)
Requester Signature			Program	Required (5 digit)
			Activity	Required (6 digit)
			Location	Not used on FTR
Authorized PRINTED Name (required)	Phone	Date		

Authorized Signature



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Record transactions below. ALL FIELDS ARE REQUIRED. ATTACH BANNER/BRIO BACKUP FOR EACH TRANSACTION.

[illegible]

0.00

*Indicate debit or credit for each line

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