

Account Type	
01 = Assets	21 = Encumbrance
02 = Liability	22 = Expenditure
03 = Fund Balance	31 = Revenue



JOURNAL VOUCHER

Date: _____

No. _____
Controller’s Use Only

Acct Type	Fund	Agency	Orgn	Sub Obj/Rev	BS Acct	Account Name	Original Trans ID/ Description	Debit Amount	Credit Amount
Totals									

Explanation:

Preparer’s Signature _____ Date _____

Authorized Account Signature _____ Date _____

Vice President for Business Affairs _____ Date _____