

2023

SOFAS Handbook



Student Organization Financial Accounting
System (SOFAS) Handbook

9/25/2023

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1.0 Contact Information

SOFAS Coordinator	Jessie Hamm
SOFAS Office	Payables Carruth-O’Leary Hall, Room 20
Telephone	(785)864-1539
E-mail address	sofas@ku.edu
SOFAS Office Hours	Monday – Friday 8am-4pm by phone and email
SOFAS Deposits	Electronically through TouchNet, Drop box on backside of Carruth O’Leary, or Cashier’s Window in Room 20
Cashiers’ Window	Monday – Friday 10 am to 3 pm

2.0 Account Status

2.1 Opening an account

If opening a new account, your organization will need to register with the Student Involvement and Leadership Center (SILC) in the Kansas Union. Please note registration must be done on an annual basis. Once registered with SILC, your organization will need to submit a signature authorization form. These documents should be submitted to the Student Organization Financial Accounting System (SOFAS) coordinator, by email, then an account will be set up for your organization. Along with the signature authorization form, you will need your faculty advisor to submit a letter of purpose that explains the purpose and plans of your organization with their signature. Once these forms are received you will be assigned an organization # and receive a confirmation email.

New account checklist

- SILC Registration - <http://www.silc.ku.edu>
- Signature card form - [SOFAS | Controllers Office \(ku.edu\)](#)
- Letter of Purpose - Email from faculty advisor with information about the organization

2.2 Maintaining an account – Annual requirements

For an organization to maintain an active status, they must register each year with SILC and submit an updated signature form to SOFAS office. All forms can be emailed to sofas@ku.edu. There will be a \$10 service fee deducted from each SOFAS account in February or March of every year.

Annual checklist (to be completed by September 15th)

- **SILC Re-Registration**
 - <http://www.silc.ku.edu>
- **Updated Signature form**
 - [SOFAS | Controllers Office \(ku.edu\)](#)
 - Signatures listed on this form are the only people allowed to submit voucher requests
 - Housing and Sports accounts require two signatures
 - Must use the two signature form located at [SOFAS | Controllers Office \(ku.edu\)](#)
 - See section 6.0 SOFAS Forms to see how to fill out form
 - Anytime there is an update in organization officers, please submit a new signature form
 - See section 6.0 SOFAS Forms to see how to fill out form

2.3 Closing an account

To close an account you will need to fill out the close an account form on [SOFAS | Controllers Office \(ku.edu\)](#) website and submit it to sofas@ku.edu with information on why you are closing the account and what to do with the remaining balance. Accounts may not be closed until the balance is at zero. SOFAS department will contact you to confirm closed account once form is received and completed.

See section 7.0 SOFAS Forms to see how to fill out the close account form.

3.0 Account Information

This section of the SOFAS handbook covers essential processes to maintaining your student organization account

3.1 Deposits

As of Fall 2024, we will only accept electronic deposits through TouchNet. Here's how it will work:

1. Scan the QR code or go to [The University of Kansas \(touchnet.net\)](https://touchnet.net) and find your club under the following store options of:
 - a. Student Organizations – Academic and Professional
 - b. Student Organizations – Arts & Culture
 - c. Student Organizations – Housing & Residence Life
 - d. Student Organizations – Social Change/Advocacy
 - e. Student Organizations – Sports Club/Recreation
2. Click on the “Product” for your specific organization.
3. Enter the Amount for your dues and add to cart.
4. If you are only paying for one club dues, then proceed to click “Checkout”.
5. You can Check out as a guest by entering your email and “Checkout as Guest”.
6. Enter the relevant payment information and click “Continue”.
7. Review the information and Click “Submit”.

We are also accepting deposits into your SOFAS account at the cashiers' windows in Carruth O'Leary, Room 20 or they can be dropped off in the drop box on the backside of Carruth O'Leary. The University of Kansas is not liable for any lost deposits you elect to send via mail for your organization. The sample deposit slip shown below can also be found at the Procurement website [SOFAS | Controllers Office \(ku.edu\)](https://sofas.ku.edu). WE ARE NOT ACCEPTING CASH AT THIS TIME.

Student Organization Deposit

Organization Name:

Date: (Submit two deposit slips per deposit)

Organization ID:

Checks:

Cash:

Deposit Total:

(For SAS Office Use Only)

Post Date:

Cashier #/I:

Voucher #:

(Enter the amount of checks and/or cash for each account code)

Account Code	Checks	Cash
<input type="text" value="459090: Donations"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="459090: Dues"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="459090: Misc."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="422900: Fundraiser"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="220212: Key Deposit"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="420500: Housing"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="462902: Refunds"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="220210: Sales Tax"/>	<input type="text"/>	<input type="text"/>
Tender Totals	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>

(Please print requested information below)

Student Org Representative:

Phone Number or Email Address:

Name of Organization's Advisor:

Figure 1: Sample SOFAS Deposit Slip

The deposit slip should be made out in duplicate with the organization name and ID at the top. In the upper half of the deposit slips, the amounts of money in coins, bills, and checks must be listed separately. Please indicate total of your deposit where the slip states “total tendered.” Note, in the lower half of the deposit

slips, the proper account codes (section 4.0 of handbook), dollar amounts, and sales tax must be completed. The total in this portion of the deposit slip should equal the upper half.

In accordance with the business procedures guide, deposits should be made at least once a week. Collected funds should not be held over the weekend. Therefore, if your organization has collected funds, make (at minimum) one deposit by Friday afternoon each week.

3.2 Payment Requests

To request a check to be issued for payment of an organizational expense, you will utilize an online voucher request form. This form directs Payables to issue a check from your account. The online voucher request form is located on our website [SOFAS | Controllers Office \(ku.edu\)](https://sogas.ku.edu). Please make sure if you have multiple receipts for the same individual/vendor that you combine them to one voucher request and attach all receipts.

SOFAS voucher request instructions

1. Go to [SOFAS | Controllers Office \(ku.edu\)](https://sogas.ku.edu) and click on SOFAS Voucher Request
2. Login using your KU Online ID
3. Fill out the SOFAS Voucher request form in detail

SOFAS Voucher Request

* Requesters Name	<input type="text" value="Lisa Rene Hetrick"/>
* Requesters Email	<input type="text" value="lisahetrick@ku.edu"/>
* Name of Organization	<input type="text"/>
Organization Account Number	<input type="text"/>
* Payee Name	<input type="text"/>
	<small>Middle initial is required for individuals</small>
* Method of receiving Payment	<input type="text" value="- Select -"/>
* Payee Street Address	<input type="text"/>
* Payee City	<input type="text"/>
* Payee State	<input type="text" value="- Select -"/>
* Payee ZIP	<input type="text"/>
* Amount	<input type="text"/>
Invoice/Customer/Account Number	<input type="text"/>
	<small>This is what shows on the payment message printed on the check. Only 26 characters</small>
* Purpose of Payment	<input type="text"/>
* Account Code	<input type="text" value="- Select -"/>
	<small>This is the description of your expense that will show on monthly statement</small>
* Is this for a Key Deposit?	<input type="text" value="- Select -"/>
2 Signature form	<input type="text" value="Browse..."/>
	<small>Please attach 2 signature form located on our website if your organization requires two signatures</small>
Receipts/Invoice	<input type="text" value="Browse..."/>
Attachment to mail with check	<input type="text" value="Browse..."/>
	<small>This is where you attach what you want sent with the check. If left blank we will mail just the check</small>
Comments	<input type="text"/>
	<input type="button" value="Submit Form"/>

Figure 2: Sample SOFAS Voucher Request

- a. **Requesters Name:** Automatically pulls your name
 - i. Requesters name must be on current authorized signature form for organization
- b. **Requesters email:** Automatically pulls your email
- c. **Name of Organization:** The name of your SOFAS account
- d. **Organization account #:** The 3 or 4-digit account # provided at opening account.
- e. **Payee Name:** Name of vendor/Individual the check will be made to. Be sure this is their given name and no nicknames so they can cash it at bank.
 - i. Must use legal name of individual/vendor
 - ii. Must have middle initial (if they do not have middle initial make note)

- iii. Voucher requests made payable to the same person who authorized the request cannot be honored
 - f. **Method of receiving payment:** Select Mail check. Due to working remotely, the option to pick up a check is not accepted
 - g. **Payee Street Address:** Street address of Vendor/Individual being paid
 - i. On campus/apartment addresses must include apt/room number
 - ii. Verify address is correct to avoid return mail. The requestor will be contacted if returned.
 - h. **Payee City:** City of Vendor/Individual being paid
 - i. **Payee State:** State of Vendor/Individual being paid
 - j. **Payee Zip:** Zip Code of Vendor/Individual being paid
 - k. **Amount:** The total amount being paid to the Vendor/Individual. This number must match total on receipts. If it is less please make a note under comments.
 - l. **Invoice/Customer/Account #:** If applicable the invoice #/ Customer #/ Account # of payment (this shows up on the payment message on the check). Only allows 26 characters.
 - m. **Purpose of Payment:** Brief description of what you are paying for
 - i. No alcoholic beverages can be purchased
 - ii. Description of payment needs to be more detail than “reimbursement” or “supplies”
 - n. **Account Code:** Please select the account code/description that pertains to your purchase, this is how it shows up on your statement.
 - o. **Is this for a Key deposit?:** Only select Yes if it is for a Key Deposit account, Most will select No
 - p. **2 Signature form:** Attach the 2 signature form if you are an organization that requires 2 signatures. If your organization does not require two signatures leave it blank. Refer to page 20 to see the form.
 - q. **Receipts/Invoice:** Attach invoice/receipt and any other necessary supporting documentation
 - i. Receipt/invoice is required for all voucher requests except key deposits.
 - ii. Receipts/invoices must be detailed and itemized to include description, quantity, cost, etc.
 - iii. Vendor reimbursements- one receipt per voucher request
 - iv. Individual reimbursements- multiple receipts per voucher request
 - r. **Attachment to mail w/check:** If you want anything to be mailed with the check please attach it here.
4. Once completed please verify that all information is accurate with as much detail as possible and Submit Form
 5. Once you submit the form the following message will appear

Thank You for completing the SOFAS form. Your form will be issued within 4 business days.

Your Reference number is FBBC893C01AE

6. You will also receive an email to confirm that we have received your request.
7. Once the check has been processed and mailed out you will receive a second email confirming your voucher is processed and completed. This confirmation email will include the check # and date it was mailed out.

****NOTE** IT CAN TAKE 7-10 BUSINESS DAYS TO FULLY PROCESS A VOUCHER REQUEST**

3.3 Reimbursable Salary & Commission

All salaries must be paid through the University of Kansas payroll system to ensure that all the appropriate taxes are processed. A check will be issued from your account to reimburse the University for Payroll Expenditures. 1099s will be issued to those individuals who receive commission from your organization. Please contact the SOFAS coordinator with any questions or concerns.

3.4 Sales Tax

This section is designed to clear up any misunderstandings about sales tax as it applies to Student Organizations.

At any event where merchandise is sold or admission is charged, sales tax must be collected and remitted to the State through the Comptroller's Office. It is not necessary to list the tax as separate items in pricing. However, if the price includes sales tax, you must indicate that fact. The retail price or admission fee may include the tax; or you may collect it in addition to the listed price, as most retail stores do. It is the responsibility of the organization to collect all sales tax due and to remit these taxes.

The proper method of paying the tax is to prepare a voucher payable to the University of Kansas, Sales Tax and give it to the Student Organization Accountant. Kansas sales tax rates can be located at <https://www.ksst.kdor.ks.gov/lookup.cfm>. City of Lawrence tax rates are located at http://www.lawrenceks.org/sales_tax. (Include with the voucher a completed sales tax itemization report). If you charge an amount that includes sales tax, you can compute the tax due by dividing the total of the receipts by 1.xxxx where x =tax rate. For example, if the tax rate is 8.7%, then the formula is Total sale / 1.087. This provides the actual selling price, and the difference between it and the total receipts will be the tax.

Student organizations are subject to the same rules as individuals and are required to pay tax on all merchandise and services purchased.

The student organizations associated with the social accounts in residence and scholarship halls, and The University Daily Kansan are exempt from paying sales tax on purchases. These organizations may apply for a Sales Tax Exemption Certificate to be used for items purchased for resale. An application for this certificate may be obtained from the SOFAS Coordinator in Payables.

It should be noted that changes in sales tax exemptions in recent years have made the applicability of these certificates extremely limited. Please call the Student Organization Accountant for guidance at any time.

A list of specific types of sales transactions, which are considered taxable by the Department of Revenue, is set out below for your information. Please use this as a guideline in the assessment, collection, and reporting of sales tax proceeds. This list is not all-inclusive. Remember the basic rule to follow is that sales tax must be assessed, collected and reported for all sales of goods and services to students, faculty and the general public (this does include the sale of photocopies to students).

Type of Sale	Comment
Meals, concessions, vending machines, banquets	Taxable if open to the general public
Supplies - medical, art, school, industrial, office, other	Taxable
Books - class discussion materials, yearbooks, annuals, programs, periodicals, newspapers	Taxable
Rentals - books, towels, musical instruments, locks	Taxable
Admission fees - plays, musicals, concerts, athletic events, movies, museums	Taxable
Uniforms, Sporting goods, T-shirts, Shoes	Taxable even if considered part of tuition
Photocopies, reproduction of printed material	Taxable

Donations Received	Comment
Any requested donation for a specific amount of money is not a donation	Taxable
Donations for unstated amounts	Not taxable However, you must make receipts available for all donations upon request. If the organization offers goods or services for any donation, the organization must accept any amount offered. Organization is allowed to list a suggestion donation amount.

4.0 SOFAS Account Codes

The following account code tables are provided for your reference. These tables should be referred to when coding revenues on deposit slips (Revenue Account Codes) and expenses on voucher requests (Expenditure Account Codes):

Revenue Account Codes	
University of Kansas, Procurement office	
Account	Description
420500	FEES
	HOUSING
422900	OTHER COMMODITY SALES
	FUNDRAISER
	SALES
430900	OTHER INTEREST
	INTEREST
459090	OTHER NONOPERATING REVENUE
	DONATIONS
	DUES
	SPONSORSHIPS
	MISCELLANEOUS
462902	OTHER REFUNDS AND REIMBURSABLE
	REFUNDS
	REIMBURSEMENTS
220212	SUSPENSE
	SCHOLARSHIPS
	KEY DEPOSIT
220210	DUE TO OTHER FUNDS
	SALES TAX

Expense Account Codes		REGISTRATIONS/DUES/ENTRY FEE	
University of Kansas, Procurement office		526610	INSTATE REGISTRATION FEES
Account	Description	526611	OUT OF STATE REGISTRATION FEES
		526612	INTERNATIONAL REGISTRATION FEES
		529101	DUES AND MEMBERSHIP FEES
		526900	ENTRY FEE
COMPUTER		SUPPLIES AND MATERIALS	
537200	COMPUTER SUPPLIES	536900	BOOKS
537510	COMPUTER HARDWARE	537100	DECORATIONS
524700	COMPUTER REPAIR & MAINTENANCE	537100	OFFICE SUPPLIES
537250	COMPUTER SOFTWARE < \$500	520100	POSTAGE
		530100	CLOTHING
		527700	ENTERTAINMENT
PRINTING AND COPYING		539900	TROPHIES, AWARDS, PLAQUES
522300	PRINTING AND COPYING	536900	OTHER SUPPLIES AND MATERIALS
523100	PHOTOCOPIER RENTAL/LEASE		
		SALARY	
TRAVEL		510100	REIMBURSEABLE SALARY (COACHES)
535100	GASOLINE		
525110	MILEAGE	SALES TAX	
	IN-STATE TRAVEL	579500	SALES TAX
525180	HOTEL		
525190	OTHER IN-STATE TRAVEL	OTHER FEES	
525120	VEHICLE RENTAL	532010	FOOD
	OUT OF STATE TRAVEL	526900	SERVICE CHARGES
525280	HOTEL	520520	TELEPHONE
525270	AIRFARE	522400	ADVERTISING
525290	OTHER OUT OF STATE TRAVEL	521900	SHIPPING AND HANDLING
525220	VEHICLE RENTAL	523900	RENTAL
	INTERNATIONAL TRAVEL	529100	SUBSCRIPTIONS
525380	HOTEL	526900	KEY/LOCK REPLACEMENT
525370	AIRFARE	526900	TICKETS
525390	OTHER INTERNATIONAL TRAVEL	527700	GUEST SPEAKER/LECTURER/ENTERTAINER
525320	VEHICLE RENTAL	527919	CONSULTANTS,CATERING,AUDIT,LAWYERS
		526900	ALL OTHER FEES AND SERVICES

5.0 Name Change Requests

Anytime you wish to change the name of your organization on the account you must fill out the name change request form located on our website [SOFAS | Controllars Office \(ku.edu\)](#). This form can be submitted by emailing it to sofas@ku.edu. See section 11.5 to see how to fill the form out. Remember that the name must match what is registered under SILC. You will receive a confirmation email once it is completed.

6.0 Transfer Requests

Anytime you wish to transfer money from one SOFAS organization account to another SOFAS organization account you will want to fill out the Transfer request form located on our website [SOFAS | Controllers Office \(ku.edu\)](#). This form can be submitted by emailing it to sofas@ku.edu. See section 11.6 to see how to fill the form out. All transfers are done through a journal entry. You will receive a confirmation email once it is completed.

7.0 Account balances

A monthly statement will be sent out each month with your account balance for that month. However, any other time you want to check your account balance please contact the SOFAS coordinator at sofas@ku.edu or call to see your balance. Only those listed on the signature form can receive a balance update.

8.0 Outstanding Checks

Outstanding checks are those that have been issued and not yet redeemed. If your organization has any checks that have been issued but not yet redeemed you will be contacted. There are three times we contact regarding outstanding checks.

- 60 Days after being issued- SOFAS coordinator will contact organization with list of outstanding checks for that organization. Organization is responsible for contacting individual/vendor. If they have check-ask to redeem ASAP, if they don't receive check or it went missing confirm remit address and report to SOFAS coordinator for reissue form
- 90 days after being issued - SOFAS coordinator mails individual/vendor reissue form to original remit address
- 180 days after being issued - Checks are voided and submitted to Unclaimed Property.

9.0 Redeeming Checks

Individual reimbursements- cash checks promptly upon receiving. Checks are voided after 180 days.

Vendor reimbursements- if vendor contacts you about not receiving a payment contact SOFAS coordinator.

When filling out voucher request verify the remit address is correct and complete the invoice #/account # box with payment information, this helps to ensure the vendor gets the check and can tie it to your account.

10.0 Monthly Statements

Account statements will be emailed by the 5th of every month. The statement reflects all transactions for the month. The statement will be emailed to the address indicated on the organization's authorization form. Your records should be reconciled to this statement each month. Please bring any discrepancies to the SOFAS coordinator's attention immediately.

11.0 SOFAS Forms

11.1 Authorized Signature Form

SOFAS Signature Authorization Form

Organization Information	
Organization Name:	
Organization #:	
Date:	
Authorized Signature Information	
As officers of Student Organization at the University of Kansas. We certified that we are duly elected or appointed persons authorized to withdraw funds from the student organization named above.	
Authorized Signer #1	
Signature	
Email	
KU Online ID	
Authorized Signer #2	
Signature	
Email	
KU Online ID	
Authorized Signer #3	
Signature	
Email	
KU Online ID	
Faculty Sponsor Authorized Signature Information	
The above signatures are correct. These persons are duly authorized to withdraw funds from the organization account, and meet my approval as Faculty Sponsor.	
Faculty Sponsor:	
Signature	
Email	
KU Online ID	
Other Requirements- Check if wanted	
<input type="checkbox"/>	Check if two signatures are required for withdrawal (Required for Sports Clubs and Housing Clubs)
<input type="checkbox"/>	Check if one signature must be the faculty sponsor

IMPORTANT:

Figure 3: Sample SOFAS Signature form

Organization Name: Name of your organization

Organization #: 3 or 4-digit account number for your organization (leave blank if opening new account)

Date: Date submitting form

Authorized Signer #: Name of Authorized Signer

Signature: Signature of Authorized Signer

Email: Email for Authorized Signer

KU Online ID: KU Online ID for Authorized Signer

Faculty Sponsor: Name of faculty Sponsor

Signature: Signature of Faculty Sponsor

Email: Email for Faculty Sponsor

KU Online ID: KU online ID for Faculty Sponsor

Other Requirements:

Select one or both of the boxes if you wish to have the requirement of two signatures for each voucher request and/or require that one signature be a faculty sponsor

(Housing/Sports accounts are required to select two signatures)

- Signature cards must be submitted beginning of each academic year and whenever officers are updated
- Must have faculty/ Staff sponsor and at least two other signatures
- Email finished signature forms to sofas@ku.edu

11.3 Two signature request Form

SOFAS Organization Two Signatures Required

Requester Organization Information	
Organization Name:	
Organization #:	
Date:	
Amount:	

Organizer Authorized Signature Information	
Authorized Signer #1	
Signature	
Email	
Authorized Signer #2	
Signature	
Email	

IMPORTANT REMINDER:

The two Authorized Signers must be on your signature card and neither should be the payee for this request.

**PLEASE ATTACH THIS DOCUMENT ALONG WITH THE
INVOICE/RECEIPT ON THE VOUCHER REQUEST**

Figure 4: Sample SOFAS Two signature form

Organization Name: Name of organization

Organization #: 3 or 4-digit account number for your organization

Date: Date submitting form

Amount: Total amount of voucher request

Authorized signer #: Name of Authorized Signer (must be name on signature card)

Signature: Signature of Authorized Signer

Email: Email for Authorized Signer

- Use this form if you are an organization that is required to have two signatures (Housing/sports are required)
- Must have two signatures. Neither signature can be the name of the person being reimbursed.
- Attach this form along with your supporting documentation on the payment request

11.4 Close SOFAS account Form

SOFAS Organization Close SOFAS account Form

Organization Information	
Organization Name:	
Organization #:	
Date:	

Reason for Closing	
Reason for closing account:	

Remaining Balance – Check information	
Payee Name:	
Payee Address:	
Payee City, State, Zip	
If transfer: Org name and # to transfer to	

Authorized Signature Information	
Authorized Signer #1	
Signature	
Email	
Authorized Signer #2	
Signature	
Email	

IMPORTANT REMINDER:

The account balance must be at zero to close the account. Must have two signatures to close the account.

Please email form to sofas@ku.edu

Figure 6: Sample SOFAS Close Account Form

Organization Name: Name of organization

Organization #: 3 or 4-digit account number for your organization

Date: Date submitting form

Reason for closing account: Provide a reason for why you are closing your account

Payee Name: Provide name of individual/vendor to send remaining balance to (if there is a balance)

Payee Address: Provide the address of individual/vendor to send remaining balance to

Payee City, State, Zip : Provide the address of individual/vendor to send remaining balance to

If transfer; org name and # to transfer to: If transferring money vs issuing check provide the organization name and # to transfer to.

Authorized signer : Name of Authorized Signer (must be name on signature card)

Signature: Signature of Authorized Signer

Email: Email for Authorized Signer

- Must have two signatures that are on signature form to close account
- SOFAS department will find remaining balance and issue check to individual/vendor indicated on form
- SOFAS will contact you once account is closed
- Please send completed forms to sofas@ku.edu

11.5 Name Change Form

SOFAS Organization Account Name Change

Organization Information	
Organization Name:	
Organization #:	
Date:	

Reason for Name Change	
Reason for name change:	

New Account Name information	
Account Name:	

Authorized Signature Information	
Authorized Signer #1	
Signature	
Email	
Authorized Signer #2	
Signature	
Email	

IMPORTANT REMINDER:

Please email form to sofas@ku.edu

Figure 7: Sample SOFAS Home Change Form

Organization Name: Name of organization

Organization #: 3 or 4-digit account number for your organization

Date: Date of submitting form

Reason for name change: Provide a reason for changing the organization name

Account name: Provide the new account name

Authorized signer #: Name of Authorized Signer (must be name on signature card)

Signature: Signature of Authorized Signer

Email: Email for Authorized Signer

- Send completed forms to sofas@ku.edu
- The new name must be the name of the organization registered with SILC

11.6 Transfer Request Form

REF #


SOFAS Organization Transfer Request

Requester Organization Information	
Organization Name:	
Organization #:	
Date of Request:	
Name of Requester:	

Payee Organization Information	
Organization Name:	
Organization #:	
Organization contact:	

Transfer Request Information	
Amount to transfer:	
Reference #: (if applicable)	

Reason for Transfer:

	
---	--

Requesters SignatureDate

Figure 8: Sample SOFAS Transfer Request

Organization Name: Name of organization to transfer money from

Organization #: 3 or 4-digit account number for your organization

Date: Date submitting form

Name of Requester: Name of person submitting transfer request

Payee Organization Name: Name of organization receiving money/transfer

Payee Organization #: 3 or 4-digit account number for their organization

Payee Organization Name: Name of person who is point of contact for their organization

Amount to transfer: Amount to transfer

Ref #: Reference # such as an invoice/etc.

Reason for Transfer: Provide a reason for the transfer

Requester's signature and date: Requester needs to sign and date bottom

- Transfer requests can be sent to sofas@ku.edu or Carruth O'Leary room 20
- Requester must be on signature form for the sending organization
- SOFAS department will send confirmation once transfer is completed

SOFAS VOUCHER PROCESS

