

REQUEST TO CLAIM ELECTRONIC FUNDS
OVER 90 DAYS OLD

Name of Department/School Requesting Funds: _____

Department Contact and Phone Number: _____

TRANSACTION INFORMATION:

Date of Electronic Payment to the University: _____

Amount of Transaction: _____

Who sent the Funds? _____

Purpose of the Payment to Purdue University: _____

Explanation of why funds were not claimed within 90 days:

General Ledger Fund, Cost Center/ Order, and GL Account where funds should be transferred: _____

APPROVALS:

Departmental Approval Date

The Office of Treasury Operations Approval Date

The completed form should be sent to: The Office of Treasury Operations, FREH