

The University of Maine

INTERDEPARTMENTAL ORDER

**Debit
Department
Information**

Department Name: _____
 Address: _____
 Phone/Fax#: _____
 Auth. Signature: _____ Printed: _____ Date: _____

This form is NOT to be used to transfer money/
 expenses between departments/campuses.

Description of item purchased

Quantity

Price Each

Total

**Only accounts 65800 or 49209 are
 to be used as credit accounts:**

65800 for fund codes 00 & 10
 49209 for fund code 03

Description of item purchased	Quantity	Price Each	Total

*** = Required Fields**

Amount

***Unit**

***DeptID**

***Account**

Class

***Fund**

Program

Project

Debit

UMS05

Credit

UMS05

Debit

UMS05

Credit

UMS05

Total Amount of I.D.O.

Goods received by:

**Credit
Department
Information**

Department Name: _____
 Address: _____
 Phone/Fax#: _____
 Auth. Signature: _____ Printed Name: _____

Please mail completed form to Budget & Business Services, 107 Alumni Hall or fax to 581-3340