

UNIVERSITY OF FLORIDA FOUNDATION, INC.  
 POST OFFICE BOX 14425  
 GAINESVILLE, FL 32604

TRANSFER TO UF  
 (UFF-U)  
 SUBMIT TO:  
 UF FOUNDATION DISBURSEMENTS DEPARTMENT  
 392-9882

Date (mm/dd/yyyy):

Transfer monies to UF Cost Center as follows:

| UF DEPTID<br>(8 digits) | SOURCE OF FUNDS<br>(6 digits) | FUND CODE<br>(3 digits) | REVENUE ACCOUNT | PROGRAM CODE<br>(4 digits) | BUDREF | DEPTFLEX<br>(10 digits) | PROJECT NUMBER<br>(8 digits) | EMPLID<br>(8 digits) | AMOUNT |
|-------------------------|-------------------------------|-------------------------|-----------------|----------------------------|--------|-------------------------|------------------------------|----------------------|--------|
|                         | F                             |                         | 430000          |                            | CRRNT  |                         |                              |                      |        |
|                         | F                             |                         | 430000          |                            | CRRNT  |                         |                              |                      |        |
|                         | F                             |                         | 430000          |                            | CRRNT  |                         |                              |                      |        |
|                         | F                             |                         | 430000          |                            | CRRNT  |                         |                              |                      |        |
|                         | F                             |                         | 430000          |                            | CRRNT  |                         |                              |                      |        |
|                         | F                             |                         | 430000          |                            | CRRNT  |                         |                              |                      |        |
|                         | F                             |                         | 430000          |                            | CRRNT  |                         |                              |                      |        |
|                         | F                             |                         | 430000          |                            | CRRNT  |                         |                              |                      |        |

**TOTAL**

**UF DEPTID:** required field

**UFF Source of Funds:** required field

**Fund Code:** required UF field

171-monies transferred to UF from DSOs

251-monies transferred to UF scholarships from DSOs

502, 551, 599-monies transferred to UF construction accounts from DSOs

For any other fund code please contact us.

**Revenue Account:** required UF field, must be 430000

**Program Code:** required UF field

**Dept Flex:** required UF field for Fund 251

**Project Number:** required UF field for Fund 502, 551, 599

**EMPLID:** optional UF field

**Amount:** total amount must equal total on UFF-D

Prepared by:

Department/Unit:

Campus telephone #:

Return receipt to: PO Box

Preparer's email address:

Deposit #:

Campus

**CASHIER APPROVAL**

Date:

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**NOTE: THIS FORM MUST BE SUBMITTED IN DUPLICATE WITH A TRANSFER REQUEST (UFF-D)  
 SUBMITTED IN DUPLICATE TO UF FOUNDATION DISBURSEMENTS DEPARTMENT.**

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