



ORANGE COAST COLLEGE

Accounting Office- Check Request/Account Transfer Form

☐

Associated Students

☐

Ancillary

☐

Co-Curricular

Date: _____

☐

Foundation

☐

Cafeteria

☐

Sailing Center

☐

CCCD Enterprises

☐

1. Please Issue a Transfer in the Amount of: _____

Transfer From Account # _____

Transfer to Account # _____

☐

2. Please Issue a Check in the Amount of: _____

Charge Account # _____

Payable To:

Date Required _____

☐

HOLD

☐

MAIL

Payment for:

Requestor: _____

Approval: _____

Please attach receipts/invoices/etc.

Advisor/Administrator