RESEARCH FOUNDATION CUNY

RESEARCH FOUNDATION
of The City University of New York
230 West 41st Street
New York, NY 10036-7207

CHECK TRANSMITTAL FORM

From _____

College _____

Phone Number _____

Email Address _____

To: Research Foundation of The City University of New York
Attention: Leonor Rivera, Admin. Assistant to CFO
230 West 41st Street, 7th Floor
New York, NY 10036
212-417-8586

Instructions

(Please do not send checks to your Project Administrator or Assistant Project Administrator)

1. All checks must be payable or endorsed to the Research Foundation of CUNY
2. Please attach to the Check Transmittal Form all checks and photo copies of each check to be deposited
3. Please enter the Check Amount, RF Project Code, Object Code, Funding Source and Comments
4. In the Funding Source Box, please enter A, B, C or D for the source of funding from one of the four following choices:
   - A. Government Agency (City, State, or Federal)
   - B. Private Sponsor
   - C. CUNY Account
   - D. All Others (Please specify origin of funds in Comments Box)

Section II. Check Amount, RF Project Code, Object Code, Funding Source and Comments

Check Amount	RF Project Code	Object Code	Funding	Comments
Total $ 0.00				

Total Number of Checks __0__

The Research Foundation of the City University of New York is a registered charitable organization regulated by the New York State Attorney General's Office. As such, we are required to monitor and report the source of all funds received. I certify that this deposit does not include tax levy expenditures such as vendor refunds, rebates or credits. As an authorized representative of the college who has knowledge of such funds, I certify that, to the best of my knowledge, the above information is accurate.

Sign _____ Title _____ Date _____

Print Name _____

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