Harvard Medical School, Office of Finance

Please fill out the form and sign on the bottom.

Journal Entry Support Form

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| --- | --- |
| Batch # |  |
| Prepared by: |  |
| Reviewed by: |  |
| Posted by: |  |
| Posted Date: |  |

|  |  |
| --- | --- |
| Description of Entry (who, what, where, when, why). Also attach and reference all supporting documents. |  |
| Frequency of entry (monthly, quarterly, annually) |  |
| How amount was derived or estimated. |  |

|  |  |
| --- | --- |
| Signature and date: | Preparer |
|  | Reviewer |