

**Georgia Department of Community Health
SFY2012 Hospital UPL Notice of Intent to Transfer
4th quarter**

Notices of Intent to Transfer for Hospital Inpatient and Outpatient UPL amounts are **due by Tuesday, May 29, 2012**. Intergovernmental transfers for Inpatient and Outpatient UPL amounts are **due no later than noon on Monday, June 4, 2012**.

Name of Governmental Unit Making IGT: _____
(Notice of Intent to Transfer can be accepted only from hospital authorities, developmental authorities or other governmental entities. Notice cannot be accepted from participating providers.)

Name of affiliated provider(s)	IGT amount
1.	
2.	
3.	
4.	
5.	
Total IGT amount	

Expected method of transfer (select one):

EFT _____ ACH _____

Designated contact if additional information is needed:

Name _____

Title / Organization _____

E-mail address _____

Telephone number _____

Return completed form by fax to Ms. Annetta Smith at (404) 657-4199 or by e-mail to asmith@dch.ga.gov