



Sponsored Funds Non-Salary Cost Transfers

DATE: _____

TO: **Research Administration & Finance (3rd Fl. West Hall)** - Financial Transaction Requests for restricted (A & B) funds

FROM:	Contact Name and Phone		
	Date of Original Charge(s)		
	Days Since Original Charge(s)	<input type="checkbox"/> Under 90 days	<input type="checkbox"/> Greater than 90 days

*Institute procedures state that all cost transfers should be requested within **90 days** of the original expenditure. If this request is **greater than 90 days**, provide additional justification as described below.*

REASON FOR TRANSFER:

- Transfer of expenditure from original sponsored fund to a non-sponsored fund.
- Transfer of expenditures between fund numbers under the same grant number.
- Transfer of expenditure charged to a non-sponsored fund while awaiting the fully executed agreement.
- Other: **Provide JUSTIFICATION** (Include additional justification on Page 2 if necessary)

1. Describe the expenditure to be transferred.

2. How does this expense directly benefit the receiving grant?

3. How did this error occur? ("To correct error," to transfer to correct project," are not acceptable.)

ADDITIONAL JUSTIFICATION FOR TRANSFERS GREATER THAN 90 DAYS

4. What unusual circumstances prevented this error from being corrected within 90 days?

5. How will you ensure that future errors will be corrected within 90 days?

CERTIFICATION (OMB A-21 requires that direct charges be "Identified specifically with a project with a high degree of accuracy.")

I certify that the cost(s) to be transferred on Page 2 of this request are appropriate expenditures for the sponsored fund(s) charged, and that the expenditure(s) comply with the terms and conditions governing the sponsored fund.

Principal Investigator or Designee

Printed Name

Date

Requester Signature

Phone (required)

Printed Name

Date

ADDITIONAL AUTHORIZATION FOR TRANSFERS GREATER THAN 90 DAYS

Senior Business Manager

Printed Name

Date

Director, Research Finance

Printed Name

Date

