

Office of Research Services Cost Transfer Request Form

Principal Investigator: _____ Prepared By: _____

Proj ID: _____ Phone: _____ Date: _____

For all cost transfers complete questions 1-5:

1. Describe in detail the expenditure(s) that are being transferred

2. If transferring the expense to a different Proj ID, describe the benefit to the project receiving the expense transfer.

3. How did the error occur?

4. If more than 60 days have passed since the expense was identified, explain the delay.

5. What steps are being taken to ensure that this error will not happen again?

Move to Proj ID/Dept ID	Move from Proj ID/Dept ID	Description	Voucher/IDT Number	Voucher/IDT Date	Amount

Principal Investigator (account holder)

Grant Administrator

Asst. Director Research Accounting

SIGNATURE _____

DATE _____