

### Cost Transfer Justification – Grants

Cost Center Details	Reallocation From	Reallocation To
Cost Center String		
Principal Investigator		
College/ Division Admin		
Project Start & End Date		

#### **Reallocation Type**

Payroll		Non – Payroll	
Employee Name		Expense Type	
Paycheck # (s)		Document #(s)	
Pay period		Expense Date	
Amount		Amount	

#### **Justification**

If transfer is made within 90 days of the effective date of the original entry, answer questions 1 and 2 only; if over 90 days, answer all four questions.

- Why was this expense(s) originally charged to the cost center from which it is now being transferred?

- How will this expense benefit the project to which you propose to move it? If payroll, please describe the work performed. If non-payroll, please describe how the item was used.

- Why is this transfer being requested more than 90 days after the accounting date of the original transaction? Attach any necessary supporting documentation. (if applicable).

- What action is needed to eliminate the future need for cost transfers of this type?

By signing below, the requester certifies that the cost to be transferred is an appropriate expenditure for the sponsored grant or contract charged and that the expenditure complies with the terms and restrictions governing the sponsored grant or contract.

Role	Name	Signature	Date
Principal Investigator 1			
Principal Investigator 2 (if appl)			
Business Administrator 1			
Business Administrator 2 (If appl)			