

**COST TRANSFER FORM**  
(For federal grants only)

Transfer Amount \$ \_\_\_\_\_  
From Fund# \_\_\_\_\_  
To Fund# 's \_\_\_\_\_  
(for multiple allocations, refer to attached documentation)

**These two questions must be addressed for every cost transfer.**

1. Why was this expense originally charged to the fund from which it is now being transferred?
2. Why should this charge be transferred to the proposed receiving federal fund?

**If transfer is made within 90 calendar days skip to approvals.**

**If transfer is made beyond 90 days, answer questions 3 & 4.**

3. Why is this cost transfer being requested more than 90 calendar days after the 15th of the month following the accounting period of the original transaction? (Attach any necessary supporting documentation)
4. How was the error discovered? What is being done to prevent this from recurring?

Requestor's signature: \_\_\_\_\_ (Principal Investigator or cognizant administrator)  
Printed name and phone no.: \_\_\_\_\_  
Date \_\_\_\_\_

**NOTE: By signing above, requestor 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 that sponsored grant or contract.**

Grants Accountant signature: \_\_\_\_\_  
Printed name: \_\_\_\_\_

**If questions 3 & 4 are applicable, the following approvals are required:**

Controller or cognizant Financial Officer  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed name: \_\_\_\_\_

Director of Budgets and Grants  
or Vice President for Finance and Administration: \_\_\_\_\_  
Printed name: \_\_\_\_\_