



## Transaction Details:

### Non-Salary Expenses

If transferring more than one expense, please include details for each expense by attaching the Supplemental Log to this request.

Original (earliest) Transaction Date	
Reference #	
Supplier Name	
P-Card Holder Name	
Purchase Order #	
Invoice #	
Cost Center	
Amount	

Supporting Documentation: For non-salary expenses, please also include the following documents related to the original transaction.

- Copy of Monthly Detail Report highlighting the expense to be transferred
- Invoice
- Travel voucher
- Other related correspondence or documentation requested by SPA

### Salary Expenses

If moving salary for more than one individual, please include details for each individual by attaching the Supplemental Log to this request.

Date(s) when effort provided to this project (enter in From and To sections below):	
From	
To	
Percentage of Salary	
Individual's Name	
Individual's Employee ID	

SPA may request additional documentation not listed here to enable staff to fully review the request.

Providing detailed documentation for costs transfers will facilitate their timely review and approval by SPA.

The Principal Investigator and their department are responsible for completing and submitting this form to SPA.

Transfers beyond 6 months from the original transaction date require AVP approval.

Signatures and Dates:

Principal Investigator

SPA Associate Director Post-Award

Department Chair or Unit Head

Assistant VP for Research

Grants and Contracts Associate