

# Cost Transfer Request Form - Non-Payroll

Request Date	Prepared By	Email	Telephone	Department/Center
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**SECTION 1 COST IDENTIFICATION** *(to be completed by requesting Department/Center)*

<i>Transfer cost TO</i>		<i>Transfer cost FROM</i>		Amount to transfer	Description	Post Date	Is cost in excess of 90 days? (If yes, must complete 2A.)
Org Key	Object Code	Org Key	Object Code				
		1					<input type="checkbox"/> N <input type="checkbox"/> Y
		2					<input type="checkbox"/> N <input type="checkbox"/> Y
		3					<input type="checkbox"/> N <input type="checkbox"/> Y
		4					<input type="checkbox"/> N <input type="checkbox"/> Y

**SECTION 2 COST TRANSFER JUSTIFICATION** *(to be completed by requesting Department/Center)*

Why was the cost(s) not originally charged to the correct project? *(Provide an explanation for each cost listed.)*

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How does the cost directly benefit the project to which it is being charged/transferred? *(Provide an explanation for each cost listed.)*

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**SECTION 2A EXCEPTION REQUEST FOR LATE COST TRANSFER REQUEST (+90 DAYS AFTER COST POSTED)**

Why was the error not identified and corrected in a timely manner?

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How was the error identified, and what steps are being taken to prevent this from recurring?

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I certify that the statements above are correct and the cost(s) requested for transfer is/are compliant with the terms and conditions governing the sponsored project and with Cal Poly Corporation and CPSU policies.

Principal Investigator Printed Name	Principal Investigator Signature	Date
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*Required for cost transfer requests in excess of 90 days*

Department Chair/Dean Printed Name	Department Chair/Dean Signature	Date
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CPC Internal Approval

Sponsored Programs Analyst Printed Name	Sponsored Programs Analyst Signature	Date
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