

# **COST TRANSFER TRAINING**

## **May 18, 2006**

### **Examples 1.1**

# **COST TRANSFERS UNDER 90 DAYS**

## EXAMPLE 1

### COST TRANSFER EXPLANATION & JUSTIFICATION FORM

If transfer is made within 90 days, answer questions 1 and 2; if over 90 days, answer all 4 questions

1. Why was this expense originally charged to the account from which it is now being transferred? (Indicate fund number and amount to be transferred)

**Jamie Potter's salary was charged to Professor East's Asian Herb Study (fund 150511) starting on the period 9/1/05.**

Which following answer is correct, why?

- A. Since fund 150511 was terminated as of 12/31/05, it is necessary to move his Jan06 salary to Professor East's another active fund.
- B. As of 1/1/06, Jamie Potter began working on The Alternative Treatment for Chronic Pain Study (fund 150612). There was a delay in processing the payroll change causing salary in the amount of \$6,000 to be incorrectly charged to fund 150511.  
520.43162.6030.150511.345992.0101.65666          \$6,000

2. Why should this charge be transferred to the proposed receiving federal account? (Indicate fund number and amount to be transferred)

**It is appropriate to transfer salary in the amount of \$6,000 to fund 150612**

Which following answer is correct, why?

- A. Because PI has told me to do so
- B. Because Jamie Potter's salary was on the proposed budget
- C. Because Jamie Potter has worked on The Placebo Treatment for Lower Back Pain project (fund 150515) since 1/1/06.  
520.45162.6030. 150612.319875.0101.65666          \$6,000

3. Why is this cost transfer being requested more than 90 days after the 15<sup>th</sup> of the month following the accounting period of the original transaction? (Attach any necessary supporting documentation)  
N/A
4. What action is needed to eliminate future need for cost transfers of this type? Is this action being taken? N/A

Requestor's signature: \_\_\_\_\_ (Principal Investigator or cognizant administrator)

Printed name, title and phone no.: \_\_\_\_\_

Date: **February 16, 2006**

## EXAMPLE 2

### COST TRANSFER EXPLANATION & JUSTIFICATION FORM

If transfer is made within 90 days, answer questions 1 and 2; if over 90 days, answer all 4 questions

1. Why was this expense originally charged to the account from which it is now being transferred? (Indicate fund number and amount to be transferred)

**PI X had assigned Rob Wu to work on The Electromagnetic Fields project fund 150375 starting in August 2005. PI X initiated a project change; however, the Lab Administrator was not notified. Salary expenses totaling \$5,467.00 from 8/1/05 to 12/1/05 need to be transferred.**

**520.45688.6030.150375.363674.0203.61234      \$5,467**

2. Why should this charge be transferred to the proposed receiving federal account? (Indicate fund number and amount to be transferred)

**Under the direction of PI X, Rob Wu's effort was reassigned to The Chemical Synthesis project fund 150380. Because the payroll change was not initiated in time a transfer between these two awards for Rob Wu's salary is required. Salary expenses totaling \$5,467.00 from 8/1/05 to 12/1/05 need to be transferred.**

**520.45688.6030.150380.359887.0101.61234      \$5,467**

3. Why is this cost transfer being requested more than 90 days after the 15<sup>th</sup> of the month following the accounting period of the original transaction? (Attach any necessary supporting documentation)
4. What action is needed to eliminate future need for cost transfers of this type? Is this action being taken?

Requestor's signature: \_\_\_\_\_ (Principal Investigator or cognizant administrator)

Printed name, title and phone no.: \_\_\_\_\_

Date: **December 3, 2005**

**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.**

If question 3 is applicable, the following approvals are required:

Senior School Financial Officer signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name, title and phone no. \_\_\_\_\_

Associate Director, OSR Financial Services signature: \_\_\_\_\_ Date \_\_\_\_\_

### EXAMPLE 3

#### COST TRANSFER EXPLANATION & JUSTIFICATION FORM

If transfer is made within 90 days, answer questions 1 and 2; if over 90 days, answer all 4 questions

1. Why was this expense originally charged to the account from which it is now being transferred? (Indicate fund number and amount to be transferred)

**Lab Supplies in the amount of \$1,500 were purchased and used for Professor Bullitt's Amyotrophic Lateral Sclerosis project (fund 148950). After posting the expense to fund 148950 on 9/22/05 it was identified that the account was overspent.**

**520.42589.6600.148950.332646.0001.64645      \$1,500**

2. Why should this charge be transferred to the proposed receiving federal account? (Indicate fund number and amount to be transferred)

**Upon closer review, Professor Bullitt identified that fund 148950 was overspent but his Heart Assymetry project (fund 146960) had recently been extended and had a significant balance remaining. Therefore, the Lab Supplies (\$1,500) should be moved to fund 148960.**

**520.42589.6600.146960.343291.0301.64645      \$1,500**

3. Why is this cost transfer being requested more than 90 days after the 15<sup>th</sup> of the month following the accounting period of the original transaction? (Attach any necessary supporting documentation)
4. What action is needed to eliminate future need for cost transfers of this type? Is this action being taken?

Requestor's signature: \_\_\_\_\_ (Principal Investigator or cognizant administrator)

Printed name, title and phone no.: \_\_\_\_\_

Date: **October 18, 2005**

**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.**

If question 3 is applicable, the following approvals are required:

Senior School Financial Officer signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name, title and phone no. \_\_\_\_\_

Associate Director, OSR Financial Services signature: \_\_\_\_\_ Date \_\_\_\_\_

## EXAMPLE 4

### COST TRANSFER EXPLANATION & JUSTIFICATION FORM

If transfer is made within 90 days, answer questions 1 and 2; if over 90 days, answer all 4 questions

1. Why was this expense originally charged to the account from which it is now being transferred? (Indicate fund number and amount to be transferred)

**80% of Dr. Lemon's salary is charged to fund 151233. He has been out of the country working for the past 6 months. He did not contact the department to inform us that his effort was being split between his 2 federal grants. Therefore we need to make to transfer 40% of his effort from fund 151233 to 150789.**

**520.46752.6010.151223.349567.0201.67258                      \$24,000**

2. Why should this charge be transferred to the proposed receiving federal account? (Indicate fund number and amount to be transferred)

**Dr. Lemon's salary should have been charged to the grants on which he expended his effort. Therefore 40% of 6 month's salary (April 2005 – September 2005) totaling \$24,000 needs to be transferred to fund 150789.**

**520.45752.6010.150789.335569.0402.67258                      \$24,000**

3. Why is this cost transfer being requested more than 90 days after the 15<sup>th</sup> of the month following the accounting period of the original transaction? (Attach any necessary supporting documentation)
4. What action is needed to eliminate future need for cost transfers of this type? Is this action being taken?

Requestor's signature: \_\_\_\_\_ (Principal Investigator or cognizant administrator)

Printed name, title and phone no.: \_\_\_\_\_

Date: **October 18, 2006**

**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.**

If question 3 is applicable, the following approvals are required:

Senior School Financial Officer signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name, title and phone no. \_\_\_\_\_

Associate Director, OSR Financial Services signature: \_\_\_\_\_ Date \_\_\_\_\_

## EXAMPLE 5

### COST TRANSFER EXPLANATION & JUSTIFICATION FORM

**If transfer is made within 90 days, answer questions 1 and 2; if over 90 days, answer all 4 questions**

1. Why was this expense originally charged to the account from which it is now being transferred?  
(Indicate fund number and amount to be transferred)

**All glasswashing charges are charged to the departmental account (000001). The charges are for the month of March 2006.**

**520.47895.6660.000001.730009.0000.00000                      \$12,465**

2. Why should this charge be transferred to the proposed receiving federal account? (Indicate fund number and amount to be transferred)  
See attached worksheet

**The glasswashing charges are being allocated to the 5 PI's who use the services. The charges to the funds are based on the headcount of individuals working on each grant. (See attached spreadsheet for percentages and actual amounts).**

3. Why is this cost transfer being requested more than 90 days after the 15<sup>th</sup> of the month following the accounting period of the original transaction? (Attach any necessary supporting documentation)
4. What action is needed to eliminate future need for cost transfers of this type? Is this action being taken?

Requestor's signature: \_\_\_\_\_ (Principal Investigator or cognizant administrator)

Printed name, title and phone no.: \_\_\_\_\_

Date: **April 18, 2004**

**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.**

If question 3 is applicable, the following approvals are required:

Senior School Financial Officer signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name, title and phone no. \_\_\_\_\_

Associate Director, OSR Financial Services signature: \_\_\_\_\_ Date \_\_\_\_\_

## EXAMPLE 6

### COST TRANSFER EXPLANATION & JUSTIFICATION FORM

If transfer is made within 90 days, answer questions 1 and 2; if over 90 days, answer all 4 questions

1. Why was this expense originally charged to the account from which it is now being transferred? (Indicate fund number and amount to be transferred)

**Year 3 of Dr. Standard's Bacterial Adhesion Pili project ended in November 2005. On February 24, 2006, salary from December 1, 2006 was moved from the year 3 account to a dept. account pending the set up of a new acct. string for the new budget year (4). No advance acct. was used because Bargain Hospital amendments to subagreements often takes longer than the 120 day grace period for advance accounts.**

**520.45332.6010.000001.730001.0000.65889          \$21,655**

2. Why should this charge be transferred to the proposed receiving federal account? (Indicate fund number and amount to be transferred)

**A late action memo was issued 5/10/06 establishing a new account for the year 4 budget. Dr. Standard's salary and effort (\$21,655) from 11/1/05 to 4/30/06 belongs to the new account 332333-0401.**

**520.45332.6010.148850.332333.0401.65889          \$21,655**

3. Why is this cost transfer being requested more than 90 days after the 15<sup>th</sup> of the month following the accounting period of the original transaction? (Attach any necessary supporting documentation)
4. What action is needed to eliminate future need for cost transfers of this type? Is this action being taken?

Requestor's signature: \_\_\_\_\_ (Principal Investigator or cognizant administrator)

Printed name, title and phone no.: \_\_\_\_\_

Date: **May 11, 2006**

**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.**

If question 3 is applicable, the following approvals are required:

Senior School Financial Officer signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name, title and phone no. \_\_\_\_\_

Associate Director, OSR Financial Services signature: \_\_\_\_\_ Date \_\_\_\_\_