Sponsored OTPS Cost Transfer Request Form

Requestor

Principal Investigator (PI)

Organization Name (Dept.) of PI

Date

Remove from (Credit):

<table>
<thead>
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<th>Banner INDEX</th>
<th>Document Code</th>
<th>Banner Account</th>
<th>Transaction Date</th>
<th>Amount</th>
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Apply to (Debit):

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Justification should address the following:

(1) When did you discover the error?

(2) How did the error occur and how is it relevant to the research?

(3) What will be done to ensure the error does not occur in the future?

(4) If cost transfer request is being submitted more than 90 days from date of discovery, why did it take more than 90 days to discover the error?
APPROVALS

I certify that the above information is appropriate and compliant with Einstein’s Cost Transfer policy.

Principal Investigator: ___________________________ Date: __________________________

If secondary Principal Investigator or Department Administrator approval is required
Principal Investigator/Department Administrator ___________________________ Date: ______

FINANCE SECTION ONLY – Finance will coordinate the below approvals if required.

Cost Transfers in excess of 90 days of the discovery of the discrepancy require the following approvals:

Manager: ______________________ Date: _____ Director: _______________________ Date: _____

Once completed, email form and appropriate attachments to RF.Postaward@einstein.yu.edu