JE TYPE:

DAT JE15 JE16 RETROACTIVE COST TRANSFER GCFA USE ONLY GCFA USE ONLY (TO TRANSFER CHARGES RELATING TO GRANT/CONTRACT ACCOUNTS) TO: **GCFA** From: Grants & Contracts **Ruth Thomason** Contact: 401 Whitehurst DEPT./RESEARCH UNIT DATE **Contact Phone:** 918-561-1405 TO: Doris Fowler 1/0/1900 COLLEGE/RESEARCH UNIT FISCAL OFFICER NAME OF P.I. DATE APPROVED PLEASE BE ACCURATE. THIS DOCUMENT WILL BE USED AS DATA ENTRY FORM. AUTHORIZATION TO DEBIT OR CREDIT THE ACCOUNTS AS INDICATED BELOW IN THE AMOUNTS AND FOR THE PURPOSE SHOWN ACCOUNT NUMBER JE D/C DESCRIPTION \$ AMOUNT **TYPE** CHART **FUND CODE** ACCT 7 7 7 7 7 7 7 7 7 7 \$0.00 Demonstrate how the Grant/Contract benefited from the above changes (to be completed by PI): For Acctg Use Date of Record Attach a copy of the invoice(s) and/or other supporting documentation. I certify the change(charge/credit) indicated on the Grant/Contract is correct; the costs are allowable; funds are available for this change; NOTE REGARDING FORM: and the Grant/Contract benefited directly from the respective changes. 1) DO **NOT** USE THIS FORM TO CORRECT CVI CHARGES FROM CAMPUS VENDORS (EX: TELEPHONE SERVICES, AUDIO VISUAL, BOOKSTORE, MOTOR POOL, PHYSICAL PLANT). YOU MUST Principal Investigator Date REQUEST CORRECTION FROM THE VENDOR DIRECTLY. 2) NINETY DAY RULE REGARDING VALID RETROACTIVE COST **CHS Grants** TRANSFERS WILL BE ENFORCED. Date Approved: **GCFA**

Date