PLANT FUND BUDGET ADJUSTMENT/FUNDING TRANSFER FORM

# PLANT BUDGET ADJUSTMENT

1. Complete charge and credit information. Include the six digit Index number and the five digit budget account code. Provide a description of the transaction and complete the amount in whole dollars.
2. Obtain the signature of the Financial Manager or Authorized Signer.
3. Check the Budget Reallocation Block and forward the form to the Budget Office, 618 Brodhead Ave.

# PLANT FUNDING TRANSFERS

|  |  |  |
| --- | --- | --- |
| IF YOU WANT TO: | CHARGE ACCOUNT: | CREDIT ACCOUNT: |
| Fund a Plant Fund deficit | (Funding Source Index) - 89970 | (Plant Index 7xxxxx) - 50970 |
| Transfer a Plant Fund surplus :  To transfer surplus to another Plant Index add: | (Plant Index 7xxxxx) – 50970  (Funding Source Index) - 89970 | (Funding Source Index) – 89970  (Plant Index 7xxxxx) - 50970 |

**NOTES: Attach a Banner print screen to show/explain the surplus/deficit and verify the index will not be put in deficit before sending it to the Controller’s Office.**

**To transfer a surplus from one plant index to fund another plant index, it must be run through the original funding source.**

1. Obtain the signature of the Financial Manager or Authorized Signer.
2. Check the Funding Transfer Block and forward the form to the Capital Asset Accounting Office, 306 S. New St, Suite 451.
3. Send a copy of this form to any Financial Manager whose Index is affected by the transaction.

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| --- | --- | --- | --- | --- |
| **(6 digits) – (5 digits)**  **Banner – Account**  **Index Code .** |  | **DESCRIPTION / EMPLOYEE NAME**  **(Limit of 35 characters)**  **(This information will be entered into the Description field of the Transaction Activity screen.)** |  | AMOUNT |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1. CHARGE:** | **-** |  |  |  |  |
| **CREDIT:** | **-** |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2. CHARGE:** | **-** |  |  |  |  |
| **CREDIT:** | **-** |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **3. CHARGE:** | **-** |  |  |  |  |
| **CREDIT:** | **-** |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **4. CHARGE:** | **-** |  |  |  |  |
| **CREDIT:** | **-** |  |  |  |  |

BUDGET ADJUSTMENT  OR FUNDING TRANSFER

|  |  |
| --- | --- |
| **EXPLANATION**: | **FOR BUDGET OFFICE OR CONTROLLER'S OFFICE USE:**  Approved:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name Department Date |

I request that the above transfer reallocation be made and if I am not the Financial Manager for a referenced Index, I have the authority from the Financial Manager to initiate this action.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Prepared by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Financial Manager or Authorized Signer Date Name Department Date