



Instructions: To request the distribution of current and/or future salary and wages, please complete all fields below. Requests to transfer salary and wages previously charged must be submitted on a Salary and Wage Cost Transfer Form.

Completed forms should be submitted to AMS, MSC 100A

Contact Name:

Contact Phone:

Employee Last Name:	Employee First Name:	Middle Initial:	Job Title:	Total FTE %:	Employee Number:
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New Charging Instructions – complete this section to indicate where the employee’s effort will be devoted for current and future pay periods.

+/-	Project	Task	Award	Start Date	End Date	FTE on account	% of salary on account (must total 100%)

Comments/Explanation (attach additional documentation as needed)

Input Processing Detail – office use only

Element Name	Project	Task	Award	Organization	Expenditure Type	Start Date	End Date	LD %	LD Action

I certify the employee's effort is/will be devoted as indicated above and verify the charges are appropriate on the account.	Office use only	Additional campus signatures as required
	_____ Sponsored Funds Financial Management (Date)	_____ (Signature) (Date)
_____ Project Director/Authorized Designee (Date)		