



**THE UNIVERSITY OF TEXAS AT AUSTIN
PLANNING, ENERGY, AND FACILITIES**

Request to Transfer Funds

Date: _____
To: PEF – Business Services, Project Accounts
Via: Replacement and Renewal Program (R&R, ADA, PUF, and LERR requests only)

<i>Copy To:</i>	
Contracting:	
PSP	<input type="checkbox"/>
CON/CSP	<input type="checkbox"/>
JOC	<input type="checkbox"/>
Const. Svcs.	<input type="checkbox"/>

Project Manager:	_____	Phone No.:	_____
Project Spec/Admin:	_____	Phone No.:	_____

Capital Project #:	_____	Building:	_____
Project Title:	_____		

Funding Requests

- New Funding Request No Project Account Needed – FAMIS Update Only
 Supplemental Funding Request PEF In-house Project

For Supplemental Funding Requests Only:

Existing CP Account #:	_____	**Funds with different unit codes cannot be funded into the same project account.**		
Current Funding:	_____	(+) Supplemental Funding Requested:	_____	(=) New Total Project Funding:

Source Account	Amount

*ALL Funding Requests must be authorized by an account signer (attach approval). TOTAL = _____

Partial Lapse Requests

Original Source Account	Project Account (36-XXXX-XXXX)	Current Free Balance (per DEFINE GBI screen)	Amount to Lapse (up to 80% of Free Balance only)

TOTAL = _____

For PMCS Use Only: Must be signed on all requests involving PMCS managed projects with the following R&R funds: CAMPUSES, ADA, and UTL/ELEV

PMCS Associate Director	Date

For R&R Use Only: Must be signed on all requests involving R&R (CAMPUSES, ADA, FLS, UTL/ELEV), PUF, and LERR funds.

R&R Program Staff	Date

FY	Source

Amount