



UNIVERSITY BUDGET OFFICE

One Time Carry forward Funding Request - FY 24

Section I: Department Information

Department Name: _____

Index: _____

Account Type: E&G _____ AUX _____

Section II: Amount Request and Justification

Date of Initial Budget Load: _____

Amount of Initial Budget Load: _____

Amount Requested: _____

Justification - Why was the money not spent before June 30?

Section III: Approvals

Prepared by:

Print Name _____ Signature _____ Date _____

Account Manger

Print Name _____ Signature _____ Date _____

Dean or Director

Print Name _____ Signature _____ Date _____

Office Use:

Request Approved Yes _____ No _____

_____ Date _____

Vice President or designee