

NUFFO Transfer Request Form Instructions

Use the **Transfer Request Form** when transferring funds from the foundation to the university. Expenses must have already been incurred and charged to a WBS/Cost Center account. The “transfer request” will reimburse the WBS account from which expenses were paid. For questions regarding this form, contact Emily Calvert at the foundation at emily.calvert@nufoundation.org or 402-458-1109.

****UNO: PLEASE CONTACT DEB WILCOX at dwilcox@unomaha.edu or 402-554-2738 BEFORE FILLING OUT A FORM****

1. We typically cannot pay for future expenses or expenses beyond the current fiscal year. Expenses older than the current fiscal year can be paid in most cases. Please include the period during which the expenses were incurred on the “Funding Period” line.

2. The “Contact” line on the form should include the name, phone number and email address of the person to contact if the foundation has questions regarding the transfer request.

3. The “Foundation Fund Name and Number” line should include the foundation fund to be used to pay for the expenses. Please include *both* the name and number of the fund. Please ensure the fund number is an eight (8) digit number (*e.g., The Foundation Fund for Bird Research #01094210*).

4. The “WBS/Cost Center Number” line should include the number of the WBS/Cost Center account that was used to pay the expenses and will be reimbursed with the transfer. Additionally, the “Balance of Account” line is used to show the balance of the WBS/Cost Center. This is typically a negative number as costs have been incurred from this account and the transfer will bring the balance back to \$0. If the balance is positive, please include supporting information as to why.

5. In the “Description of Project” space, please include a brief description of how the project and expenditures relate to the purpose of the fund. The purpose of each fund can be found in the Fund Summary Memorandum on NUFFO. However, please do not copy and paste the fund purpose on this line. We must know how the specific expenses relate to the purpose of the fund.

6. The types of expenses that can be paid via a transfer request are as follows:

A. Salary Expenses – This space is used for expenses paid for the salary and benefits of an employee. Please include the name and title of the person as well as how he/she relates to the nature of the fund (*e.g., Jane Smith Research Assistant*). If you have any questions regarding the payment of benefits from a specific fund, please contact Emily Calvert at the foundation.

B. Other Expenses – This space is used for expenses that are not salary or awards. Please be as detailed as possible. For example, a request for conference expenses should include a detailed description of the conference being attended, the names and titles of those attending, a breakdown of travel costs and registration fees and any other relevant expenses for which you are seeking to have paid from the fund.

C. Award Payments – This space is for one-time award payments to faculty and staff. Please fill in all the information and route the original signed form to your campus payroll contact.

- UNK: Jill Purdy, 135 WRNH, UNK, Kearney NE 68849
- UNL: Lana Anderson, 408 ADMS, UNL, Lincoln NE 68588-0439
- UNMC: Cyndie Poffenbarger, ADC 4008, UNMC, Omaha NE 68198-5100
- UNO: Drew Nielsen, 209 EAB, UNO, Omaha NE 68182

7. Please read the Fund Summary Memorandum of the requested fund to determine who has signature/spending authority. This information is also on NUFFO under “Authorized Personnel.” This is the person who *must* sign the form.

8. Although backup documentation is not required for a transfer request, it is often helpful in ensuring all relevant information has been included. Copies of receipts/invoices, SAP printouts, emails, etc., may contain necessary information that is too cumbersome to include on the Transfer Request Form itself.

9. Once the form is complete, **if it is an award payment, please mail the original signed form to your campus payroll contact (see 6C).**

For all other expenses, please send the completed form to the following individuals:

- UNK: Debbie Tvrdy, 136 WRNH, UNK, Kearney NE 68849
- UNL: Mardi Bonner, 151 WHIT, UNL, Lincoln NE 68583-0861
- UNMC: Cyndie Poffenbarger, ADC 4008, UNMC, Omaha NE 68198-5100
- UNO: Deb Wilcox, 208 EAB, UNO, Omaha NE 68182

Those individuals will forward requests to the foundation for processing. Payment via ACH occurs anywhere from weekly to bi-monthly depending on the wishes of the campus.

Request for Transfer from Foundation Funds

Date: _____ Department Name: _____

Project Director: _____

Contact (Name, phone and email): _____

Foundation Fund Name and Number: _____

WBS/Cost Center Number: _____ Balance of Account: _____

(Put amount as shown on WBS statement "Bottom Cell in the Life to Date" column.)

Description of Project (Planned use of funds):

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Funding Period (Enter start and end date): _____

Salary Expenses:

<u>Name and Nature of Work Performed</u>	<u>Salary</u>	<u>Benefits</u>	<u>Total</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Expenses:

<u>Provide a Detailed Description</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____

Grand Total and Other Expenses

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<p>*ONE-TIME AWARD PAYMENTS TO FACULTY AND STAFF*</p> <p>Employee Name: _____ Position Name: _____</p> <p>SAP Personnel Code: _____ Title Code: _____</p> <p>Gross Amount: _____ Date Available: _____</p> <p>Reason for Payment: _____</p>	<p style="text-align: center;"><u>PAYROLL USE ONLY</u></p> <p>Gross Amount: _____</p> <p>FICA Cost: _____</p> <p>Total Cost: _____</p> <p>UNF Auth. Amount: _____</p>
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I certify that the above expenditure is in agreement with the fund agreement for the foundation **fund** number listed.

Signature	Date
Signature	Date
Signature	Date
Signature	Date

<p>Foundation Use:</p> <p>The following three areas have been checked:</p> <ol style="list-style-type: none"> 1. Authorized Signers 2. Purpose 3. Sufficient Funds <p>By _____ Date _____</p> <p>Supervisor Approval:</p> <p>By _____ Date _____</p>
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