

# Marshall University

## Request for Additional Funds

This form is to be submitted to the Budget Office, OM 210, to request funding for unanticipated items after the normal budget process.

Budget Request Fiscal Year: _____	Date Submitted _____
Org #: _____	Org Name: _____
Org Manager: _____	
Telephone Number: _____	Signature _____

Briefly describe the project or activity requiring funding:

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Please attach a complete budget showing how the additional funds will be spent within each of the four categories listed below. Please be specific and detailed. If any personal services dollars are being requested, indicate if this is a new position or the filling of a vacant position. List each position separately with associated FTE.

Personal Services Total            \$ \_\_\_\_\_

Fringe Benefits Total            \$ \_\_\_\_\_

Current Expense Total            \$ \_\_\_\_\_

Equipment Total                  \$ \_\_\_\_\_

Total    \$ \_\_\_\_\_

Does this request commit any funds beyond the current Fiscal Year? \_\_\_\_\_

If so, please explain: \_\_\_\_\_

Dean's Approval: \_\_\_\_\_ Date \_\_\_\_\_

Director/VP Approval \_\_\_\_\_ Date \_\_\_\_\_

<b>Budget Office Approval</b>			
<b>Fund</b>	<b>Org</b>	<b>Account</b>	<b>Amount</b>
			Date: _____

<b>Sr.VP Finance and Administration Approval</b>		
Comments: _____		
Base Adjustment <input type="checkbox"/> Yes <input type="checkbox"/> No		
Amount: _____	Signature: _____	Date: _____