

## Accounting Adjustment/Reallocation Form

Fiscal Year

Date

[CLICK HERE](#) TO ACCESS COST CENTER AND REVENUE/SPEND CATEGORY INFORMATION

### ADJUST FROM

Cost Center Name

Fund	Cost Center Number or Cost Center Name	Revenue or Spend Category	Ledger Account	Worktag Type (if applicable)	Worktag Name (if applicable)	Amount to Increase
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### ADJUST TO

Cost Center Name

Fund	Cost Center Number or Cost Center Name	Revenue or Spend Category	Ledger Account	Worktag Type (if applicable)	Worktag Name (if applicable)	Amount to Decrease
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**Justification** (*Adjustments will not be processed without justification. Attach documentation*)

### Signatures

Initiated By

Cost Center Manager

Cost Center Manager

Please forward signed/completed form to: [transferfar@csc.edu](mailto:transferfar@csc.edu)