



## RESEARCH (RESTRICTED) SALARY & BENEFIT ADJUSTMENT (SBA) FORM

Use this form when the transfer of expenses (debit lines) are to research (restricted) funds (F530, F531 and F535).

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**Reason** 004 - Research (restricted) project salary transfer

**Code:** 007 - Clear suspense  
(check one)

**Explanation of Transfer:**

(Required)

Provide a clear explanation as to why the new project (i.e. the project being debited) is now absorbing prior period salary expense. Up to 250 characters may be entered into PeopleSoft HCM - SBA.

**Total \$ Value of New Debit Lines**

(complete one)

Exact \$ Value:

Estimated \$ Value (e.g. when % used):

or

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**Prepared by**

Name (printed):

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**Independent Reviewer**

Name (printed):

Signature:

Date (mm/dd/yyyy):

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**Budget Owner (Project Holder)**

I confirm the information is an accurate record of expenses and the appropriate supporting documentation is attached. These expenses were in support of the research project and in compliance with sponsor guidelines and/or donor terms.

Name (printed):

Signature:

Date (mm/dd/yyyy):

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Supporting documentation must be attached and filed with this form.