



## COST ACCOUNTING JUSTIFICATION Non-Personnel Costs

incipal Investigator (PI):			Or		
			Prop	osal OSP#:	
To Be Completed By the Principa	al Investigato	or -			
Item Description:					
Justification (How Does This Exper		_	•		
Will this item benefit multi If Yes, provide the budge	•		_	_	at benefit.
	n / Distributio		0/	Total Costs \$	
1st Account #				iotai Cost: \$_	
2nd Account #					
3rd Account #				Signature of Principal Invest	rincipal Investigato
4th Account # TOTAL					
	\$	or	%	Date	
To Be Completed by the Dept. or	Research A	dmin			:
PI Email:					
Award Name:					
Award Period:					
If Item Has Been Purchased: Docu	ument #:		Objec	ot Code:	
Research Administrator or Financial Comments:	Officer:	] Approve	e 🗍 De	ny	
Signaturo:			Da	to	
Signature:			Da	te:	
	Additional A	<u>Approvals</u>	(Optiona	<u>ll)</u>	
ītle	Signa	ature			Date
itle	Signature				Date