UNIVERSITY OF WASHINGTON

INTERDEPARTMENTAL

E-Mail: gcahelp@uw.edu Phone (206) 616-9995 Date Prepared 4/13/2020

TO:	Grant & Contra	ct Accounting								
FROM:	Computer S	cience and	Engineeri	ng	Prepared by	Jennife	r Snow	Phone	5-1964	
			_		Mail Stop	352350		E-Mail	jennsnow	
SUBJECT:	TRANSACTION	S / PARENT A	ND / OR SUE	SS (TRANSPASU)						
	given to the alloc as defined belo		(transfer) fron	n University of Washingt	on Parent Budge	t No.	68-0661	which expires	on	
	— the following act									
Establish a new Sub-Budget No. From Parent Budget above. Complete all A, B, C, & D below. Transfer amount indicated below from										
the parent of this sub-budget. Specific Purpose of Sub Budget					t Funds Managed by Other Dept.					
_ `	e advance budge		with budget noted below	v. Complete any changes in A and all of B, C, & D.						
Change PI on sub-budget Complete PI Name, Dept, EID, & org code in A, and all of C & D.										
Supplement on Budget No Transfer the amounts shown below from the parent. Complete B, C, & D.										
Transfer amounts indicated below from Sub-account No.						to the parent budget. Complete B, C, & D.				
			for changes	or new accounts:						
Sub-Budget Title: (22 spaces or less) UWRL 2020 Majumdar							Old Budget #			
Current Budget Period: 5/01/2020-4/30/2022 Total Budget					get Period:		5/01/2020-4/30/2022			
Principal In	vestigator Name	(Last)			(First)		(M.I.)	PI Departmen	t	
Majumdar					Arka		Electrical Engineering			
PI Employee ID No. Organization Code							Mail Stop			
850-007-889				2600007070				352500		
Location of	Project <	On-Campus	□APL	Region	nal Med Library	□VAMC				
(check one)			e Center	☐ Other Off-Campus ☐ SLU Inc			irect Cost Rate: Per Award			
B. The foll	lowing budget ar	nounts are to	be transferr	ed between the parent	& the sub-acco	unt				
01 Salaries and Wages					06 Equipment					
02 Contract Pers Serv					07 Retirement & Benefits					
03 Other Contractual Serv					08 Grants & Subsidies					
03-62 Subcontract					38 Unallocated Budget 50,000					
03					36 Advance Budget					
04 Travel					Total Direct Costs					
05 Supplies					25-99 Indirect Costs Rate:					
						Т	OTAL BUDGET	50,000		
C. Fiscally	Responsible De	pt. See GIM-	2		D. Parent Department Approval					
Principal Investigator Signature Wajumda—					Parent Dept./Authorized Signature					
Dean/Chair/Director Signature					Budget Number (GCA use only)					
Departmen Ele	t Name	puter Scien	ıce							