



Cost Transfer Form

Course Presented By:

Education and Training Key Function
Clinical and Translational Science Institute (CTSI)
HRC 2800
Medical College of Wisconsin

Course: Clinical Trial Design 6/5/14 - 7/31/14

Name: _____

Department: _____

Institution: _____

Fee: \$100.00

Credit: \$100.00 – 75001-470300-103-030, Project #3304558

Charge expense to:

Amount – Cost Center-Natural Account-Fund-Activity; Project #

Authorized Signature: _____ Date: _____

Please return completed form to:

Clinical and Translational Science Institute (CTSI)
Mike Leppellere (414.955.4750); mleppellere@mcw.edu
HRC2800
MCW