

UNIVERSITY OF MIAMI CAPITAL EQUIPMENT EXCEPTION REQUEST FORM

Capital Equipment Name:				<u>.</u>	Requested Date			
Budget Unit:					Total Equipment Request Type:		\$	<u> </u>
Requestor Name:					For "Other"	please explain:		
Equipment Approved in FY 2022 Phase I Ca	apital Budget:	Ye□	N€		Equipment Star	rt Date:		
Funding Source:					Funding Driver	:		
EQUIPMENT DESCRIPTION AND FUR	NCTION							
JUSTIFICATION								
OPERATING CASH FLOW	Life to Date						FY 2027 &	T T
	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	Beyond	Total
Equipment Costs: Academy Operation Surplus Unit Reserves Gifts (on hand) Gifts (to be raised) Sponsored Awards								- - - - - -
Debt Total	-	-	-	-	-	_	-	-
Estimated Annual O&M								-
	Life to Date						FY 2027 &	
Funding: Academy Operation Surplus Unit Reserves New Incoming Revenue Gifts (on hand) Gifts (to be raised)** Sponsored Awards	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	Beyond	Total
Debt Total	_	-	-	-	· -	-	-	-
**Note: The funding cash flow for Gifts (to be r	raised) should repres	ent when the cas	sh is expected to	come in rather th	ne gift is being rais	ed.		
Dean/VP (Division/School Equipment approval)		Date	-	Exec. VP, Bu	siness & Finance	and COO		Date
Sr. Business Manager (SBM)/Finance Offic (Division/School Equipment approval)	er	Date		Exec. VP, Ac	ademic Affairs ar	nd Provost		Date
				Financial Plan	nning & Analysis			Date