(01/14)

State Of Minnesota
Department Of Transportation

State Funded - IDIQ Request for Group Funding Redistribution Form

Low SP: _____ Contract:_____ Task Order Number: _____

District: _____ District Office: _____

Requested By: _____

Task Order Total Amount: _____

Total Amount to be Re-distributed: _____

Group #	Group SP #	Amount
	Total *	**0.00**

* Must show a negitive (-) withdrawl from one or multiple groups and positive (+) entries to one or multiple groups. The Total after taking the requested re-distribution moves into account must always equal zero (0). This form can not be used to move funds from one Task Order to another Task Order covered by the contract or add additional funds to the Task Order.

_____

Project Engineer/Resident Engineer - PLEASE PRINT, THEN INITIAL and DATE

_____

Completed By – OCIC TO Specialist – Please Print - Date

Copy: File