



Department Name: _____

Type of Request: ☐ New Expenditure Account ☐ New Revenue Account ☐ New Faculty Account(s) ¹
☐ New Cost Center ☐ Account/Fund Link

Please complete the following section when requesting a new **expenditure** account. If a new cost-center is required, complete Section C.

¹ Note: Instruction, Academic Support, Research, and Startup accounts are created for new faculty

Please complete the following section when requesting a new **revenue** account.

<p>1) If this request is for a new revenue account, which expenditure account will be linked to the new revenue fund?</p> <p>_____</p>	<p>2) If this is revenue generated as part of a contract with an External Organization, please include the agreement number:</p> <p>_____</p>
<p>3) Please describe in detail the type of activity or services that will be occurring that will result in revenue? Where will the revenue be coming from (e.g. Internal/External Customer)?</p>	

SECTION C: REQUEST FOR A NEW COST-CENTER

Please complete the following section when requesting a new **cost-center** to be linked to a new or existing account.

1) Please describe the reason for establishing a new cost-center. This should describe the activity that will flow through the account, why a new cost-center is needed and why existing cost-center(s) cannot be used (if applicable).	2.a) For existing accounts, please identify the base-account number to be linked to the new cost-center: _____
	2) Suggested Cost-Center: _____

SECTION D: REQUEST FOR AN ACCOUNT/FUND LINK

Please complete the following section when requesting the link of an account/cost-center string to a fund. For the account/fund link, please ensure that an approval (e.g. email confirmation) or award letter is attached as backup. If this is an Interlocation Transfer-of-Funds (ITF), also include a copy of the ITF and any additional correspondences/documentation.

1) Please identify the account/cost-center and fund to be linked in the Financial System: Account/Cost-Center: _____ Fund: _____	2) What is the purpose of the funds being transferred? _____
3) What is the FAU where the funds are coming from? _____	4) Please attach the following documents as backup: a) Approval/Award Letter: _____ b) A copy of the ITF: _____ c) ITF Correspondence/Documentation: _____ d) Other: _____

SECTION E: ACCOUNT MANAGEMENT & APPROVALS

Name and Title of Person Reconciling Account: _____		
Request Prepared By: _____	Phone: _____	Date: _____
Department Manager Signature: _____	Date: _____	

ACCOUNTING USE ONLY

Date Request Received: _____
Processed By: _____
Date Request Completed: _____