ACCOUNT ______________

REQUEST FOR ESTABLISHMENT OF AN ACCOUNT CODE

SECTION I: General Information

1. Date ______________

2. Person Making Request _____________________________________________________

3. Type:  _____ Asset  _____ Liability  _____  Revenue  _____ Expenditure

4. (a) Is this a change to an existing code? ________

   (b) If yes, what is the account number? ________

SECTION II: Account Information

1. Describe why this account is needed.

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

2. Provide a brief definition of the account that could be used for publication to other units.

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

3. Suggested Account Title
   (NOTE: Cannot exceed 35 characters)

4. Signature of Requestor __________________________________________
SECTION III: Approval
Approval must be made in the order designated below. If the request is disapproved at any level, the form is to be returned to the originator noting the reason for disapproval. Upon final approval, Data Control will notify the originator of the account number(s) to be used.

<table>
<thead>
<tr>
<th>Action</th>
<th>Signatures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assoc. Budget Officer</td>
<td></td>
</tr>
<tr>
<td>Associate Controller</td>
<td></td>
</tr>
<tr>
<td>Finance Systems Manager</td>
<td></td>
</tr>
</tbody>
</table>

SECTION IV: Accounting System Information

ACCOUNT INFO

ACCOUNT CODE MAINTENANCE FORM (FTMACCT)

Chart of Accounts: _____
Account: _________ Title: __________________________________________
Date
Effective: __________ Term: ______________
Predecessor Account: __________
Data Entry __________
Account Type: _________ Income Type: ____________
Account Class: _________ Asset Account: __________
Accumulated Depreciation: ____________
Depreciation Expense: ______________
Pool Account: __________
Fringe Account: __________
Fringe Percent: _________ Normal Balance: _________
SYSTEM DATA MAINTENANCE FORM (FTMSDAT)

Entity/Usage Code: ________  Attribute Code: ________________
Optional Code #1: ________  Optional Code #2: ________________
Chart of Accounts: ________
Date Effective: ___________  Termination: _________________

Description/Title: _____________________________________________________________
Short Title: __________________________
Data: __________________________

DATA CONTROL

Date established _______________  Department Notified _________________
Keyed: ________________________ (Initials)