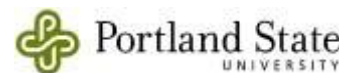


FIS Chart of Accounts Code Request



PLEASE NOTE: FORM MUST BE COMPLETED ELECTRONICALLY. HANDWRITTEN FORMS WILL NOT BE ACCEPTED.

Request Date: _____
 Requestor's Name: _____
 Requestor's Email: _____
 Requestor's Ext: _____

Code assigned: _____

 (CAS USE ONLY)

NOTE: Do not use this form for Research Grants/Contracts

Type of Request: ☐ New ☐ Change, or ☐ Termination ☐ Signature Change only

Code changed/terminated: _____

New Code Requested: ☐ Fund ☐ Organization ☐ Activity ☐ Index ☐ Account

Title: _____ Predecessor Code (required if new org/fund): _____

Index Requested: Fund: _____ Organization: _____ Program: _____ Activity: _____

Reason: Briefly explain need for new code. If requesting a new fund or organization, include projected budget for anticipated expenses and revenues. Attach separate page if necessary.

Note: Some Funds will incur automatic administrative charges on expenditures:

-Self-Support 016xxx/CE 050000-054999/Designated Operations 055xxx-058499

-Some Auxiliary Funds- Auxiliary rate depends on funding source

(For current rates you may contact the Budget Office or University Financial Services)

(For PSU policy - http://www.pdx.edu/sites/www.pdx.edu.financial-services/files/BAO_Indirect_Cost_Policy.pdf)

Will Payroll be recorded in this FOAPAL? ☐ Yes ☐ No

If a deficit occurs, which FOAPAL will be responsible? _____ - _____ - _____ - _____ - _____
 Index Fund Organization Program Activity

FUND AND/OR ORGANIZATION: INDIVIDUALS AUTHORIZED TO APPROVE EXPENDITURES*

*note: Online FIS approvers must have requested system access on the FIS & HRIS Access request Form.

Name	Title	FIS System Approval	Non-FIS System	
			Payroll	Other
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Department Head (all codes): _____ Date: _____
 Dean's Office Approval (fund, org.): _____ Date: _____
 Budget Office Approval (fund, org.): _____ Date: _____
 PSU Controller Approval (fund, org.): _____ Date: _____
 Campus Accounting Services Approval (all codes): _____ Date: _____

Once completed, please scan and email form to Campus Accounting Services/Chart Set Up Team – chartset@pdx.edu. Original documents should be retained by Department for Internal support purposes.