

APPLICATION FOR
 AN ACCOUNT NUMBER
 (Current Unrestricted)*
 INITIAL BUDGET REQUEST

DATE PREPARED

____ / ____ / ____

ACCOUNT TITLE	FISCAL OFFICER	BLDG./RM.	EXT.

NATURE OF PROGRAM ACTIVITY (COMPLETE IN DETAIL AND ATTACH SUPPORTING DOCUMENTATION)

SOURCE OF AUTHORIZED REVENUE

NATURE OF AUTHORIZED EXPENSE

DESCRIPTION	ACCT CODE	AMOUNT
STATE APPROPRIATED	N/A	
MANDATORY FEES	0021	
PENALTIES & FINES	0030	
SERVICE FEE	0040	
GIFTS	0042	
COST RECOVERIES	0046	
SALES	0050	
UNIV FACILITIES REV	0060	
PARKING INCOME	0070	
OTHERS	0700	
TOTAL INCOME		

DESCRIPTION	ACCT CODE	AMOUNT
ADMINISTRATORS SALARIES	*1120A	
CIVIL SERVICE SALARIES	*1120C	
FACULTY SALARIES	*1120F	
EXTRA HELP	*1130	
STUDENT	*1140	
FRINGES (SS & MED)	1170	
CONTRACTUAL	1200	
TRAVEL	1290	
COMMODITIES	1300	
PURCHASE RESALE/SALE	1400	
EQUIPMENT	1500	
TELECOMMUNICATIONS	1700	
OPERATION OF AUTO	1800	
AWARDS & GRANTS	4400	
PERMANENT IMPROVEMENTS	6600	
MANDATORY TRANSFERS	8100	
NON-MANDATORY TRANSFERS	8200	
TOTAL EXPENSE		

* ADDITIONAL DETAIL BY POSITION MAY BE REQUIRED (Includes overrides, overtime, temp upgrade where applicable). CHECK WITH THE BUDGET OFFICE. (Attach forms if necessary)

YOUR PROMPT ACTION IS REQUIRED

APPROVALS

FISCAL OFFICER	DATE	VICE PRESIDENT	DATE
	____ / ____ / ____		____ / ____ / ____
DEPARTMENT CHAIRPERSON (if different for Fiscal Officer)	DATE	CONTROLLER	DATE
	____ / ____ / ____		____ / ____ / ____
DEAN/DIRECTOR	DATE	DIRECTOR OF BUDGETS	DATE
	____ / ____ / ____		____ / ____ / ____

FOR CONTROLLER / BUDGET OFFICE ONLY

FUND CODE ASSIGNED

ORGANIZATION CODE

EFFECTIVE DATE ____ / ____ / ____

DISTRIBUTION: BUDGET OFFICE, FINANCIAL AFFAIRS OFFICE, FISCAL OFFICER

* THIS FORM IS NOT TO BE USED FOR CASH-BASED ACCOUNTS.