

"A" Account Request Form

This form must be completed to request a new "A" Account. Please enter information below. The Controller's Office will assign the Account #. Once completed, forward to your Campus Business Officer. CBO will forward to Controller's Office upon approval.

Person Completing Form: _____ **Phone No:** _____

Short Name (20 Characters): _____

Long Name (40 characters): _____

Funds Center Account # and Name: _____

MOU Reporting Area (Vice-Chancellor Code): _____

Responsible Cost Center Account # and Name: _____

Responsible Person Name: _____

Responsible Person Personnel Number: _____

REQUIRED EXPLANATION

Please provide a brief explanation addressing the need and the intended use for the Account. *Revolving Accounts require Year End Closing information as to how account will be monitored & closed.

Chief Business Office Approval

Systems Administration Approval (where applicable)

Types of "A" Accounts:

Accounts Receivable - Axx**05**xxxxx Deferred

Revenue - Axx**55**xxxxx

Deposit - Axx**51**xxxxx

Payroll Deduction/Contribution - Axx**58**xxxxx

Petty Cash - Axx**01**xxxxx

Revolving - Axx**70**xxxxx

Required Approval:

CBO only

CBO only

CBO only

CBO & Systems Administration

CBO & Systems Administration

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