

The State University of New York
Office of the University Controller
Chart of Account Request Form

Type of Request:	<input type="checkbox"/> New Account	<input type="checkbox"/> Change	<input type="checkbox"/> Close						
Campus:		Fiscal Year:							
Account Number:		Account Title:							
NACUBO Function:		Fund:							
Exp/Use? Y <input type="checkbox"/> N <input type="checkbox"/>	Utility? Y <input type="checkbox"/> N <input type="checkbox"/>	Fund Override? Y <input type="checkbox"/> N <input type="checkbox"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 2px;">For System Admin Use Only:</td> <td style="width: 33%; padding: 2px;">Lump Sum? Y <input type="checkbox"/> N <input type="checkbox"/></td> <td style="width: 33%; padding: 2px;">Cost Center Override? Y <input type="checkbox"/> N <input type="checkbox"/></td> </tr> <tr> <td colspan="3" style="padding: 2px;">_____</td> </tr> </table>	For System Admin Use Only:	Lump Sum? Y <input type="checkbox"/> N <input type="checkbox"/>	Cost Center Override? Y <input type="checkbox"/> N <input type="checkbox"/>	_____		
For System Admin Use Only:	Lump Sum? Y <input type="checkbox"/> N <input type="checkbox"/>	Cost Center Override? Y <input type="checkbox"/> N <input type="checkbox"/>							

Justification for establishing new account (Please specify what type of expenditures will be charged to this account, so that the proper NACUBO function can be determined for GL reporting purposes)

Please complete these required fields for IFR accounts:

Associated State Account:	Revenue Classes:
Program Begin Date:	
Program End Date:	
Major Project Code:	

Requested By:	
Date Submitted:	

Please send all Chart of Account requests to UCO-COA@suny.edu