Colorado State University – Pueblo

ACCOUNTS CREATE REQUEST

REQUESTED BY:Abby Gade PHONE:x2761

**PURPOSE:**

This form is required to establish an account on the Colorado State University – Pueblo Financial Reporting System. Please complete the form as indicated below and return with attachments, if applicable, to the Accounting Office (Administration Building 212).

1. Account Title: Grant Title
2. Fiscal Officer: PI
3. Fiscal Officer Delegate: To Be Determined
4. Account Manager: To Be Determined (Cannot be the PI if PI is Fiscal Officer)
5. Account Supervisor: To Be Determined (Cannot be the PI if PI is Fiscal Officer)
6. Organization Code: P103
7. Account Purpose: RSAA; Grant Title: TBD
8. Account Revenue: Externally funded; No revenue generated.
9. Account Expense: Expenses Related to project/program management

**INSTRUCTIONS:**

1. Enter suggested name for this account not to exceed twenty-five alpha-numeric characters.
2. Enter the name of the Fiscal Officer. This is the person that will have approval authority for all documents created in this account.
3. Enter the name of the alternate Fiscal Officer for this account. This person has the responsibility to approve documents in the Fiscal Officer’s absence. This person should not regularly create documents or be a p-card reconciler for the same account.
4. Enter name of the Account Manager. The Account Manager has the responsibility for ensuring that funds are spent and managed according to the goals an, objective, and mission of the organization, to ensure that funds are being spent according to a budgeted plan and that the allocation of expenditures is appropriate to the function identified in the account.
5. Enter the Account Supervisor. The Account Supervisor provides oversight for account management at a higher level than the Account Manager, but rarely receives any direct requests for action from KFS.
6. Enter the Organization Code: This is the Department associated with the account.
7. Indicate the purpose of the account.
8. Describe the income for the account.
9. Describe the expenses for the account.

# FOR ACCOUNTING OFFICE USE ONLY

Account Number Assigned: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cash Reversion? Yes or No Reversion account number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nacubo Code:\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Fringe account number (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_

Funding Source Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Controller’s Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prepared and Entered By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_