

Fund Code Maintenance Form

Please indicate request type: Add: _____ Change _____

Chart of Accounts: **B**

Active Status: [x]

Grant Code: _____ Proposal Code: _____

Fund Code: _____ (If restricted plant, agency or designated - must have grant #. Low level fund 6 characters - all numeric.)

FTMFUND

Title: _____ (Maximum 35 characters)

Dates: Effective: _____ (mm / dd /yy) Term: _____ (mm / dd /yy)

Expend End Date: _____ (mm / dd /yy) Data Entry: [] [X] or []

Fund Type: _____ (2 Alpha / Numeric) [X] means lowest level accepting detail transactions.
[] means this is a Rollup Account.

Predecessor Fund: _____ (6 Alpha / Numeric)

Financial Manager: _____ (SSN or ID 9 characters)

Unbilled AR Acct: _____ (6 characters in length - 4 numeric) Revenue Acct: _____ (6 characters in length - 4 numeric)

Bank: _____ (2 Alpha / Numeric) Default Orgn: _____ (5 Numeric)

FRMFUND

Dates: Effective: _____ (mm / dd /yy) Term: _____ (mm / dd /yy)

Budget Period: _____ (mm / dd /yy) To: _____ (mm / dd /yy)

-- F&A Cost Codes:

Default F&A Codes from Grant: yes ☐ no ☐

S&W ☐ TDC ☐ 2MTDC ☐ EVOS ☐ Other _____

Rate Code _____

Charge Code: _____

Distribution

Code: _____

-- Cost Share Codes:

Default Cost Share Codes from Grant: yes ☐ no ☐

Indirect Cost Basis Code: _____

Indirect Cost Rate Code: _____

Indirect Cost Acct Code: _____

Indirect Cost Distr Code: _____

Prepared

by: _____

Approved

by: _____

Date: _____