

# LEWIS-CLARK STATE COLLEGE

## New Account Request Form

Date \_\_\_\_\_

Name of New Account: \_\_\_\_\_

Purpose of New Account: \_\_\_\_\_ 30 characters max

Source of Income: \_\_\_\_\_

Will Personnel costs be charged to this account: \_\_\_\_\_ Check One:

Will Irregular Help costs be charged to this account: \_\_\_\_\_ Check One:

Will Employee Travel be charged to this account: \_\_\_\_\_ Check One:

Will Operating exp's be charged to this account: \_\_\_\_\_ Check One:

**F9 access:** \_\_\_\_\_  
Department (Please Print)

**Access to Requisition/ICP input:** \_\_\_\_\_  
Name (Please Print)

**Online Requisition/ICP approvers:** \_\_\_\_\_  
Name (Please Print)

**WebNow access:** \_\_\_\_\_  
Name (Please Print)

**Prepared by:**

Comments:

For Controller's Office Use Only			Input by: _____	Date: _____
Fund	Function	Cost Center	Acct Description	Effective Date
Fund Balance	_____	(Except 10, 12, Aux)	<input type="checkbox"/> Pooled	_____ Date
Revenue Objects	_____	(Except 10, 12)	<input type="checkbox"/> F9	
Payroll Objects	_____		<input type="checkbox"/> FinStmntPlcmt	
Expense Objects	_____		<input type="checkbox"/> GL GLUD/APPM	
			Distribution:	
			CO	
			PR	
			Budget	
			Grants	
			Dept reqstd	