



California State University

Bakersfield



FISCAL SERVICES

Accounting

Chartfield Request Form - Signature Authorization Form

Choose one

ADD / MODIFY CHARTFIELDS

Explain

INACTIVATE CHARTFIELDS

Explain

ADD / DELETE SIGNERS

Explain

BusUnit	Fund	DeptID	Account	Program	Proj/Grant	Class
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Payroll Costs Apply? YES NO

Effective Date: (Use **07/01/yyyy**, if **adding** a value)

Title:

Project ONLY: Start Date End Date

Program ONLY: University-wide Program

Requested by: _____
Department Signature Print Date

Authorized Signatures

NOTE: Two authorized signers are required

ADD DELETE

1.	_____	Signature	Print	Date
2.	_____	Signature	Print	Date
3.	_____	Signature	Print	Date
4.	_____	Signature	Print	Date

For Financial Reporting Use ONLY

Value Assigned: _____	ATT: _____	Acct. _____
FIRMS Prog: _____	FNAT: _____	Sign. Auth. _____
Entered by: _____	Date: _____	

For questions please contact Accounting Dept. @ ext. 2177

http://www.csub.edu/bas/fiscal/accounting/documents/chartfield_request.pdf