

Chartfield Request Form

Accounting Services 1000 E. Victoria St. WH 430 Carson, CA 90747 310-243-3791

| CHARTFIELD REQUEST | | | | | | |
|--|-------------------------------|------------|---------------------------|--------------------|------------|--|
| Request Type: | ☐ Add * | ☐ Modify * | ☐ Inactivate | □ Reactivate | | |
| Requested Chartfield | BusUnit d: | Account | Fund Prog | gram Class | Project ** | |
| Have you verified the Chartfield value does not exist? ☐ Yes ☐ No | | | | | | |
| Effective Date: | | | | | | |
| Description: | | | | | | |
| *If add or modify, state purpose: **Please add the scope of work if requesting new project code. | | | | | | |
| ** Project ONLY: S | tart date: | End | l date: | | | |
| FORM APPROVAL | | | | | | |
| Requested by: Department: | (PRINT NAME) | (SI | <i>GNATURE)</i> Phone: | | (DATE) | |
| Approved by: | (PRINT NAME) | (SI | GNATURE) | | (DATE) | |
| ACCOUNTING SERVICES USE ONLY | | | | | | |
| Value assigned: | ATT: FNAT: | | | FIRMS object code: | | |
| Claimable? | Yes 🗆 No | | | | | |
| Created in CFS by: | eated in CFS by: (PRINT NAME) | | | (DATE) | | |