



Bursar's Office Detail Code Request Form

Submit form to Bursar's Office. For any questions, please call (678) 359-5010.

Date of Request:	
Name of Requestor:	
Department:	
Phone Number:	
Budget Manager:	
Budget Manager Signature:	

Create a new detail code
Change to existing detail code
Inactivate existing detail code

Detail Code: _____

Date Effective: _____

Use of Detail Code: Charge Payment

Suggested Detail Code Description:	
Reason for Request:	

Will this activity involve sales to the general public? Yes No

Date Submitted: _____ Date Needed (allow 10 business days): _____

Accounting String:

A (Dr)

_____ _____ _____ _____ _____ _____
 FUND PROGRAM CLASS DEPT ID PROJ/GRANT ACCOUNT

B (Cr)

_____ _____ _____ _____ _____ _____
 FUND PROGRAM CLASS DEPT ID PROJ/GRANT ACCOUNT

FOR BURSAR'S OFFICE USE ONLY:

Detail Code Created: _____ Category Code: _____ Priority: _____

Type: Charge Payment Term Based: Yes No

Refundable: Yes No Institutional Charges: Yes No

Title IV: Yes No G/L Enterable: Yes No

Payment Type: Cash Exemption Financial Aid Misc. Credits Third Party

Detail Code Created/Modified By: _____ Date: _____

Bursar or AR Coordinator Signature: _____ Date: _____