DEPARTMENT ERROR CORRECTION FORM

(For Non-Payroll Transactions)
321 Ingram Hall   Auburn University, AL 36849-5161

DEBIT FUND NAME: _____

DEBIT ORGANIZATION NAME: _____

CREDIT FUND NAME: _____

CREDIT ORGANIZATION NAME: _____

DATE PROCESSED: _____

DEPT. REQUESTING CORRECTION: _____   Building: _____   Phone: _____

(SHADED AREAS FOR BUSINESS OFFICE USE ONLY!)

DEBIT				JOURNAL TYPE			AMOUNT TO BE TRANSFERRED	VOUCHER NUMBER	CREDIT			
Fund	Org	Account	Program		MM/DD/YY	REFERENCE NO.			Fund	Org	Account	Program

PLEASE COMPLETE A SEPARATE FORM FOR EACH DOCUMENT REQUIRING CORRECTION(S). Attach a copy of the document (voucher, etc.)
with all backup that pertains to this expenditure. NOTE: Expenditures over 90 days old cannot be transferred.

Please complete ALL blanks; type "NA" if the blank does not apply: (NOTE: FGIBDST is the detailed transactions portion of the monthly organization printouts.)

*1.   Description: Enter the date of original transaction (month/day/year) from FGIBDST; and Ref. No. for the expenditure to be transferred

2.   "REV/EXP" Amount _____ ;and Journal Type _____

3.   Direct Charge Unit, if applicable, e.g., Univ. Bkstr., Printing, etc.

4.   Property Control No. (If expenditure is a component to existing equipment, please enter the Property Control No. for the existing equipment.)

5.   JUSTIFICATION for the transfer (required by Federal regulations):

a. How did the error occur? (Please check the applicable statement, or check "Other" and give the explanation.)

Used FUND for wrong budget period of multi-year grant or continuing contract.

Transposed digits in a FOAP element.

Used wrong account code, organzation code is correct

An element of the FOAP was keypunched wrong in the central Business Office.

OTHER: _____

_____

b.What is the product or service that is being transferred? _____

c.If the "FOAP to Be Charged" is a contract/grant or Federal appropriation, was this product or service used for the direct benefit of that project?   Yes   No   NA

BUSINESS OFFICE USE ONLY	
	Prepared By Department _____ Date

Approved by Contracts & Grants Accounting (if C/G accounts are involved)   Approved by Department _____   Date

or Financial Reporting (if non-contract/grant accounts):

_____   Date: _____   Other Approvals _____   Date

BO 99-04 (Rev. 2/06-B)