



**UNIVERSITY**  
*of* **ARKANSAS**  
 AT PINE BLUFF  
 1873

**CONTROLLER'S OFFICE**  
 Mail Slot 4984 • 1200 North University Drive  
 OFFICE: (870) 575-8266 • FAX: (870) 575-4649

# MEMO

**TO:** General Ledger Accounting Staff  
 Controller's Office

**FROM:**

**DATE:**

**RE:** Request for new Agency Account

**Organization Name:** \_\_\_\_\_

**Purpose of New Account:** \_\_\_\_\_

**Source of Funds deposited into New Account:** \_\_\_\_\_

**Additional pertinent information:** \_\_\_\_\_

**Budget Officer/Advisor for new University Department/Cost Center:**

\_\_\_\_\_

**Name**

**Department/Division**

**Request approved by:** \_\_\_\_\_

**CONTROLLER'S OFFICE USE ONLY**

**FUND:** \_\_\_\_\_ **FUNCTION:** \_\_\_\_\_ **CENTER:** \_\_\_\_\_

**OBJECT CODES: 11010, 18110, 39998, REVENUE:** \_\_\_\_\_ **EXPENSES:** \_\_\_\_\_

**DATE AUTHORIZED:** \_\_\_\_\_ **GL ACCOUNTANT:** \_\_\_\_\_