

# EL PASO COMMUNITY COLLEGE BANNER FUND / ORGANIZATION / ACCOUNT MAINTENANCE FORM

Purpose of Form: To request new codes, to change existing codes, and to deactivate or reactivate old codes.  
Submit form to Associate Comptroller - General Accounting. Authorized signer will be notified of new codes or changes.

Please follow instructions in parenthesis:

Type of Action *(complete one box below, use a separate form for each type of action)*

<p><b>New Code</b> <i>(check one below)</i></p> <p>Fund <i>(type of resources)</i> Organization <i>(dept or prog)</i> Fund and organization Account <i>(object of expenditure)</i></p> <p style="text-align: center;"><i>(continue completing form)</i></p>
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<p><b>Report a change</b></p> <p>Fund number _____ Organization number _____ Account number _____ Effective date _____</p> <p style="text-align: center;"><i>(report changes in line items one through three, continue to approval section)</i></p>
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<p><b>Inactivate      Reactivate</b></p> <p>Fund number _____ Organization number _____ Account number _____ Effective date _____ Reason _____</p> <p style="text-align: center;"><i>(continue to approval section)</i></p>
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1. Account Title *(limit 34 spaces)* \_\_\_\_\_
2. Budget Head Name, Title \_\_\_\_\_ ID # \_\_\_\_\_ Ext. # \_\_\_\_\_
3. Location of Budget Head *(campus, room no.)* \_\_\_\_\_
4. For New Fund, Organization, or Account *(complete one applicable box only):*

<p><b>New Fund -</b> <i>(check one below)</i></p> <p>Restricted Fund <i>(complete section five)</i> Self Supporting <i>(complete section six)</i> Plant Fund <i>(complete section seven)</i> Agency Fund <i>(go to approval section)</i> Endowment <i>(go to approval section)</i></p>	<p><b>New Organization -</b></p> <p>Program Code no. _____ Predecessor Org no. _____</p> <p style="text-align: center;"><b><i>This box is for the Budget Office and Grants Office use only.</i></b></p> <p style="text-align: center;"><i>( go to approval section )</i></p>	<p><b>New Account -</b> <i>(check one below)</i></p> <p>Revenue Expenditure Other _____</p> <p style="text-align: center;"><i>( go to approval section )</i></p>
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5. Check if applicable:      Grant      Contract / Agreement *(attach grant / agreement to form, including EPCC budget)*  
Agency / Organization \_\_\_\_\_ Contact name / telephone number \_\_\_\_\_  
Project Period \_\_\_\_\_ Amount \_\_\_\_\_ Check one:    Federal CFDA # \_\_\_\_\_    State    Local / Private  
Check if applicable:    Cost Sharing Basis \_\_\_\_\_%    Matching Fund \_\_\_\_\_ - \_\_\_\_\_ *(attach report of expenditures)*  
Check if applicable:    Donation                      Internal Scholarship                      External Scholarship  
*(go to approval section)*

6. Check Applicable:      Workshop      Conference      Services      Other \_\_\_\_\_  
*(attach EPCC budget and memorandum justification per guidelines for self supporting funds)*  
*(go to approval section)*

7. Check one:      Unexpended      Renewals and Replacements      Debt Retirement      Investment in Plant  
*(attach EPCC budget to form)*  
Describe purpose for new number \_\_\_\_\_  
Special instructions \_\_\_\_\_  
*(go to approval section)*

Approved by \_\_\_\_\_

<i>Budget Head or Grants Mgmt Signature</i>	<i>Title</i>	<i>Ext. no.</i>	<i>Date</i>
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Reviewed by \_\_\_\_\_

<i>Signature</i>	<i>Title</i>	<i>Ext. no.</i>	<i>Date</i>
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*(if required)*

<b>TO BE COMPLETED BY GENERAL ACCOUNTING</b>	
New Banner number: Fund _____ Organization _____ Account _____	
Approved copy to:      Requestor      Budget Office      Bursar	
Approved original copy forwarded to designated Accounting Specialist _____	
_____	_____
<i>Associate Comptroller / General Accounting</i>	<i>Date</i>