



Change in account responsibility

Start Date _____

List Speedtypes:	Speedtype #	Description
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____

Responsible Person was: _____

New Responsible Person:

Name: _____ Empl ID: _____
Title: _____
Department: _____ Campus: _____
Phone Extension: _____ Mail Zip: _____

Reason for change: _____

Approvals: _____

Requester: _____
Department Chair/Director: _____

★ Send completed form to: Budget Office for Budgetary Accounts, @6202
Controller's Office for Non-Budgetary Accounts, @6205

★ If the Responsible Person requires Security Access to Financial Budgetary Inquiry, please fill out a Computer Center Security Form and forward to the Controller's Office.

BUDGET & CONTROLLER'S OFFICE USE ONLY	
Approved By:	_____
Other Comments	_____
