

**THE TEXAS A&M UNIVERSITY SYSTEM  
SYSTEM ADMINISTRATIVE AND GENERAL OFFICES  
REQUEST FOR ADDITION, CHANGE OR DELETION  
TO CLASSIFICATION CODES**

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> ACCOUNT CONTROL | <input type="checkbox"/> BUDGET POOL CODE | <input type="checkbox"/> REVENUE OBJECT CODE | <input type="checkbox"/> EXPENSE OBJECT CODE |
| <input type="checkbox"/> ADDITION        | <input type="checkbox"/> CHANGE           | <input type="checkbox"/> DELETION            | <input type="checkbox"/> FREEZE              |

NUMBER/CODE:

FAMIS (current or suggested) \_\_\_\_\_  
 Comptroller Object (if known) \_\_\_\_\_  
 LBB Object (if known) \_\_\_\_\_  
 LAR Object (if known) \_\_\_\_\_

FAMIS TITLE (35 characters/less): \_\_\_\_\_

INTERNET TITLE: \_\_\_\_\_

DESCRIPTION:

REASON FOR REQUEST:

\_\_\_\_\_  
Financial Officer or Designee

\_\_\_\_\_  
Date

\_\_\_\_\_  
E-Mail Address

**FOR SYSTEM BUDGETS & ACCOUNTING USE ONLY**

Comp Obj: _____	Pool: _____
IRS 1099: _____	CWF: _____
HUB Cat: _____	Freeze: _____
LBB: _____	PPI: _____
LAR: _____	Footnote: _____
AFR Roll Up: _____	
Op Status: _____	

TAMUS MEMBER \_\_\_\_\_

ALL 00 01 02 04 05 06 07 09 10 11 12 15 16 17 18 20 21 22 23 24 25 26 28 29 30 99 Effective Date: \_\_\_\_\_

NOTIFICATION TO FAMIS:  
 FAMIS Contact famishelp  
 \_\_\_\_\_  
 Date

REQUESTOR NOTIFICATION:  
 Contact Method: E-mail  
 FAX  
 Phone  
  
 Person Contacted:  
 \_\_\_\_\_  
  
 Contact Made by:  
 \_\_\_\_\_

Budgets & Accounting  
 Approval: \_\_\_\_\_

Update Made:  
 Internet \_\_\_\_\_