



New Account

ROUTING
FIP
MSC CAR
Fip@nmsu.edu
Phone 646-1514

New accounts may be requested for expense, revenue, or Net Asset Statement activities. Please submit the form to **Cost Accounting and Financial Services - MSC CAR** for processing.

SECTION 1: REQUESTOR INFORMATION

Date (mm/dd/yyyy): _____ Requestor Name: _____ E-mail Address: _____

Phone: _____ Department: _____ Campus Box: _____

SECTION 2: REQUEST DETAILS

1. **Title:** (Description - 35 characters) _____

2. **Effective Date:** (mm/dd/yyyy) _____

3. **This Account is:** (Check one) Asset Liability Revenue Labor Expense Non-Labor Expense Transfer

4. **Purpose of this account is:**

SECTION 3: APPROVAL

Printed Name _____ Signature _____ Date _____

Principal Investigator Dean/VP/CC President Designee

SECTION 4: INTERNAL DEPARTMENT USE ONLY

Approved by: _____ Date: _____

Account #: _____ Predecessor #: _____

Processed by: _____ Date: _____

Reset