

Sam Houston State University

MEMBER THE TEXAS STATE UNIVERSITY SYSTEM

Office of the Controller

Sul Ross BearKatBuy New Activity Code Request Form

1. Division: _____
2. Fund: _____ Fund Title: _____
3. Organization: _____ Organization Title: _____

Prepared by: _____

Title: _____

Date: _____

Phone Number: _____

Sul Ross Accounting and Finance Approval:

Approved by: _____

Title: _____

Date: _____

Phone Number: _____

SHSU Controller's Office Use Only:

Activity Code Assigned: _____

Processed by: _____ Date: _____

Please route this completed form to:

Sul Ross Accounting and Finance Attn: **Corina Ramirez**

cramirez@sulross.edu