

Instructions for Preparation of University of Hawaii
FMIS-41A, Contract Adjustment Form

a. General Guidelines

This form shall be used 1) to liquidate a remaining balance on a completed contract; 2) to record changes in encumbrance data, e.g., account code/object code/amount; or 3) to record applicable changes to contract terms which may affect payment processing, e.g., changes to contract period, payment terms, Contractor's name.

b. Completion Instructions

All fields must be completed unless noted as optional. Shaded items represent information to be completed by OPRPRM.

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| 1) Campus | Enter Campus Code under which initial encumbrance was processed. |
| 2) Date | Enter date of preparation (mm/dd/yy). |
| 3) Contract Number | Enter applicable contract number (previously assigned by OPRPRM). |
| 4) Contractor/Payee Name | Enter Contractor's complete name. If contract is made with an individual, enter last name, first name, middle initial. |
| 5) Contractor/Payee Remittance Address | Enter Contractor's complete remittance address, including zip code, where payment should be sent. |
| 6) Vendor Code/Vendor Federal Tax ID | Leave Vendor Code blank. Enter Federal Tax Identification number (if individual, enter Social Security number) if known, otherwise, leave blank. |

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| 7) Requisitioner/Phone | Enter name and telephone number of person requesting contract adjustment. |
| 8) Department | Enter organization for which contract was entered into. |
| 9) Reason for Change Request | Provide pertinent details of reason(s) for change request (i.e., to liquidate a remaining encumbrance on a completed contract; to record changes in encumbrance data, e.g., account code, object code, amount; or to record applicable changes to contract terms which may affect payment processing, e.g., changes to contract period, payment terms, or Contractor's name. |
| 10) Start Date/
Completion Date | Enter effective dates of contract period. |
| 11) Amount Previously Encumbered | Enter total amount previously encumbered for the contract period. |
| 12) Encumbrance Adjustment Amount (Increase or Decrease) | Enter net change in amount resulting from this adjustment action (difference between previously encumbered amount and revised total contract amount). |
| 13) Revised Total Contract Amount | Enter new total contract amount. |

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| 14) Account Code/
Object Code/Amount/
Debit (D)/Credit (C) | Enter detailed changes to account code/object code distributions. Net summary of debit (increase) and credit (decrease) amounts should be equal to Item 12, Encumbrance Adjustment Amount. Enter "D" for Debit to denote an increase to an account code/object code distribution or "C" for Credit to denote a decrease to an account code/object code distribution. |
| 15) Contractual Obligation Completed | Check box if contractual obligation is completed. |
| 16) Fund Certification/
Date/F.O. Code No. | Signature of Fiscal Officer authorized to certify as to availability of funds for account code(s) cited and as to compliance with applicable University policies and procedures. Include date of signature and appropriate F.O. Code No. |
| 17) OPRPRM Approval | To be signed by OPRPRM specialist upon verification of contract and encumbrance adjustments. |

c. Distribution

Submit in triplicate to OPRPRM.