

<b>GALC-25</b> (12/01/13)	<b>UNIVERSITY OF HAWAII</b> <b>OBJECT CODE MAINTENANCE FORM</b>		
Object Code: _____ Object Code Name: _____ <small>(Object code name or suggested name, 40 character limit)</small> Purpose/Reason: _____		<b>ACTION:</b> <div style="display: flex; justify-content: space-around;"><div><input type="checkbox"/> New</div><div><input type="checkbox"/> Edit</div><div><input type="checkbox"/> Inactivate</div></div>	
Basic Accounting Category: <input type="checkbox"/> Income <input type="checkbox"/> Expense <input type="checkbox"/> Asset <input type="checkbox"/> Liability <input type="checkbox"/> Fund Balance			
Document Type(s): _____ <small>(List the document types object code will be used on (e.g. AD, DI, DV, REQ))</small>			
Requested By:			
Print Name _____		Department _____	Phone _____
Signature _____		Date _____	
Fiscal Administrator:			
Print Name _____		Department _____	Phone _____
Signature _____		Date _____	F.O. Code _____
<b>Disbursing</b> <small>(Disbursing and Payroll Office)</small>			
Print Name _____		Title _____	Phone _____
Signature _____		Date _____	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected
Reason for Rejection: _____			
Reporting Requirement: <input type="checkbox"/> 1099 <input type="checkbox"/> 1042 <input type="checkbox"/> W2 Payroll <input type="checkbox"/> W2 Relocation <input type="checkbox"/> None			
Parameter/Table Update: <input type="checkbox"/> YES <input type="checkbox"/> NO			
Parameter/Table Name: _____			
<b>OPRPM</b> <small>(Office of Procurement and Real Property Management)</small>			
Print Name _____		Title _____	Phone _____
Signature _____		Date _____	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected
Reason for Rejection: _____			
Parameter/Table Update: <input type="checkbox"/> YES <input type="checkbox"/> NO			
Parameter/Table Name: _____			
<b>ORS</b> <small>(Office of Research Services)</small>			
Print Name _____		Title _____	Phone _____
Signature _____		Date _____	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected
Reason for Rejection: _____			
CG Budget Summary Code: _____ <small>CGBudSumm</small>			
Parameter/Table Update: <input type="checkbox"/> YES <input type="checkbox"/> NO			
Parameter/Table Name: _____			

<b>GALC-25</b> (12/01/13)					
<b>UBO</b> (University Budget Office)					
Print Name _____		Title _____		Phone _____	
Signature _____		Date _____		<input type="checkbox"/> Approved <input type="checkbox"/> Rejected	
Reason for Rejection: _____					
Budget Summary Codes: _____					
BudSumm1 _____		BudSumm2 _____			
Parameter/Table Update: <input type="checkbox"/> YES		<input type="checkbox"/> NO			
Parameter/Table Name: _____					
<b>PFMO</b> (Property and Fund Management Office)					
Print Name _____		Title _____		Phone _____	
Signature _____		Date _____		<input type="checkbox"/> Approved <input type="checkbox"/> Rejected	
Reason for Rejection: _____					
Parameter/Table Update: <input type="checkbox"/> YES <input type="checkbox"/> NO					
Parameter/Table Name: _____					
<b>BURSAR</b> (Univ Cashier's, Banner SIS Accts Receivable, Treasury Office)					
Print Name _____		Title _____		Phone _____	
Signature _____		Date _____		<input type="checkbox"/> Approved <input type="checkbox"/> Rejected	
Reason for Rejection: _____					
Parameter/Table Update: <input type="checkbox"/> YES <input type="checkbox"/> NO					
Parameter/Table Name: _____					
<b>GALC</b> (General Accounting and Loan Collection)					
Print Name _____		Title _____		Phone _____	
Signature _____		Date _____		<input type="checkbox"/> Approved <input type="checkbox"/> Rejected	
Reason for Rejection: _____					
State Approval: <input type="checkbox"/> Not Required <input type="checkbox"/> Approved <input type="checkbox"/> Rejected (See Attachment)					
Attributes:					
Object Code Short Name (25 char limit) _____		Object Type _____		Level Code _____	
Obj Sub-Type _____					
Historic _____		Budget _____		Tfr/Elim _____	
Federal _____		Next Yr _____			
UH Extended Attributes:					
DAGS State _____		DAGS Outside _____		Financial Stmt _____	
BudSumm1 _____		BudSumm2 _____		CGBudSumm _____	
TST: _____		QA: _____		PROD: _____	
e-Doc # _____		e-Doc Date _____		e-Doc # _____	
e-Doc Date _____		e-Doc # _____		e-Doc Date _____	
Parameter/Table Update: <input type="checkbox"/> YES <input type="checkbox"/> NO					
Parameter/Table Name: _____					

Return completed form to:

General Accounting and Loan Collection ~ 1406 Lower Campus Road Bldg 171C Rm 41 ~ Honolulu, HI 96822

GALC-25 (12/01/13)	<b>UNIVERSITY OF HAWAII</b> <b>OBJECT CODE MAINTENANCE FORM INSTRUCTIONS</b>
<b>PURPOSE:</b> The information on this form is used to maintain object code information in the Kualii Financial System.	
Action:	Check the appropriate action to be taken: New (create new object code), Edit (revise an existing object code), Inactivate (inactivate an existing object code).
Object Code:	Enter the object code to be edited or inactivated, otherwise leave blank for new object code requests. To be completed by the General Accounting and Loan Collection Office (GALC).
Object Code Name:	Enter the object code name or suggested object code name (40 character limit).
Purpose/Reason:	Enter the type of activity this object code will be used for (i.e. new expense object code to record .... expenditures) or the reason for editing or inactivating an existing object code. Please be as detailed as possible so the System Administrative Offices can evaluate for the appropriate use of the object code.
Basic Accounting Category:	Select the appropriate basic accounting category that classifies the object code into the respective income statement (Income/Expense) or balance sheet (Asset/Liability/ Fund Balance) groupings.
Document Types:	List the document types the object codes will be used on (e.g. AD-Advance Deposit, DI-Distribution of Income and Expense, DV-Disbursement Voucher, REQ-Requisition, etc.)
Requested By:	Enter the First and Last Name, Department Name, and Phone Number of the Requestor. The Requestor must sign and date the form.
Fiscal Administrator:	Enter the First and Last Name, Department Name, Phone Number and F.O. Code of the Requestor's Fiscal Administrator. The Fiscal Administrator must sign and date the form. The Fiscal Administrator forwards the form to General Accounting and Loan Collection, 1406 Lower Campus Road Bldg 171C Rm 41, Honolulu, HI 96822.
Disbursing, OPRPM, ORS, UBO, PFMO, BURSAR:	<p>Enter the First and Last Name, Title and Phone Number of the System Level Administrator representative reviewing the form. The System Level Administrator representative must sign, date and check Approved or Rejected. If the request is rejected, a detailed reason for rejection must be entered and form returned to GALC.</p> <p>If the request is approved, the reporting requirement, parameter/table update, parameter/ table name and budget summary codes must be completed as applicable. Forward the approved form to the next System Administrative Office for review.</p> <p>Forward the fully approved request to GALC for further completion of the State Approval, Attributes, UH Extended Attributes, TST, QA, PROD environment update, parameter/table sections of form.</p>
GALC:	<p>Enter the First and Last Name, Title and Phone Number of the GALC representative reviewing the form. The GALC representative must sign, date and check Approved or Rejected. If the request is rejected, a detailed reason for rejection must be entered and form returned to the Fiscal Administrator. If the request is approved, forward the form to the Disbursing for review.</p> <p>If the request is fully approved, obtain the State Approval if required, enter the respective attributes to be assigned and complete parameter/table update and parameter table names as applicable. Create or edit the object code in KFS.</p> <p>The object code maintenance e-Doc number and date created in the TST, QA and PROD environments must be entered on the form. Attach the completed form to the respective e-Doc as supporting documentation.</p>