



Office of the Controller

New Index Request Form

1. Department's Name: _____
2. Financial Manager's Name and Lamar ID: _____
3. Proposed Title (**must be less than 35 characters**)

4. Please provide a comprehensive narrative describing the activity to be recorded in the requested index. Please include source of funds and types of expenditures.

5. What is or will be the source of funds for this new Index?

Prepared by: _____ Signature: _____ Date: _____ Phone Number: _____ Email: _____
Approvals:
Financial Manager _____ Date _____ Dept. Head/Director _____ Date _____ Dean of College _____ Date _____ Provost/Vice President _____ Date _____
Controller's Office Use Only:
Fund Assigned: _____ Org Assigned: _____ Processed by: _____ Date _____ Authorization: _____ Date _____

***Please direct any questions to Spencer Sims or Nancy Bergeron in the Controller's Office. ***

Requesting department contact info in case of additional questions: Name: _____ Phone number: _____ Email: _____
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Please route this form along with the appropriate associated forms to: Controller's Office: financialservices@lamar.edu For questions about this form please contact: Spencer Sims or Nancy Bergeron Phone: 409-880-1788 or Phone: 409-880-8910
