

# CORRECTION REQUEST FORM

FOR OFFICE USE ONLY

Entry Number \_\_\_\_\_  
Entry Date \_\_\_\_\_  
Approval \_\_\_\_\_

Please fill out this form to request a correction. All information should be completed.  
Please call ext. 4150 if you have questions.

**MARK TYPE OF TRANSACTION ORIGINALLY PROCESSED:**

Voucher \_\_\_\_ Clearing \_\_\_\_ BPC \_\_\_\_ JE \_\_\_\_ Deposit \_\_\_\_

**ORIGINAL ENTRY :**

REF NO.		Fund	Object	Unit	FY	Amount

**CORRECTION REQUESTED:**

		Fund	Object	Unit	FY	Amount

Reason for correction request: (REQUIRED)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Copies to:

Authorized Signature: (IF REQUIRED)

Extension:

Date:

\_\_\_\_\_

\_\_\_\_\_

Submitted by:

Extension:

Date:

\_\_\_\_\_

\_\_\_\_\_