

## **Detail Code Request Form - Departments**

Office of Student Accounts 100 Sparks Hall 404-413-2144 fax

Email: aroperations@gsu.edu

Detail codes are unique, four digits, alpha/numeric codes used to place and identify charges and credits on accounts in *Banner* AR. Detail codes link *Banner* AR to the *PeopleSoft* General and/or Operating Ledgers. Every Detail code is mapped to two Chart of Account numbers (i.e, speed types) so that when used it always generates the appropriate two-sided accounting distribution that records the transaction in the University's General and/or Operating Ledgers according to the pertinent finance rules.

Complete and submit the Detail Code Request form when requesting a new or updating and existing detail code.



## **Detail Code Request Form – Departments**

College:Office/Department:  Panther ID:Email:  Reason for Request: Request a new Detail Code Change an existing Detail of Request that an existing Detail Code be inactivated  Please describe why a new detail code is needed, an existing detail code needshould be deactivated:  Please enter the description to be used in Banner (30 characters max). This is the customer's bill:	e:
Reason for Request: Request a new Detail Code	
Reason for Request: Request a new Detail Code  Request that an existing Detail Code be inactivated  Please describe why a new detail code is needed, an existing detail code needshould be deactivated:  Please enter the description to be used in Banner (30 characters max). This in the customer's bill:  Provide Accounting Distribution for Revenue:  Account Fund* Org Program Class Budget  Line A Budget  *Charge detail codes must map to either a self-supporting [auxiliary] or agence  Requestors Signature:  Approving Official Name: Phone:  Student Account Office Only Below This Line  Detail Code: Payment   Direct Deposit: Aid Year Based: Tax Type: Type: Charge/Payment   Refundable: Like Term: Inst Charge: Exclude Inv Payment Hill Code: Receipt: Active: Like Period: Refundable: Receipt: Refundable: Receipt: Refundable: Receipt: Refundable: Receipt: Rece	
Request that an existing Detail Code be inactivated   Please describe why a new detail code is needed, an existing detail code needshould be deactivated:  Please enter the description to be used in Banner (30 characters max). This is the customer's bill:  Provide Accounting Distribution for Revenue:  Account Fund* Org Program Class Budget Line A  *Charge detail codes must map to either a self-supporting [auxiliary] or agence Requestors Signature:  Approving Official Name:  Phone:  Student Account Office Only Below This Line  Detail Code:  Type: Charge/Payment Category:  Grant Type:  Refundable:  Refundable:  Receipt:  Refundable:  Refundable	
Please enter the description to be used in Banner (30 characters max). This is the customer's bill:  Provide Accounting Distribution for Revenue:  Account Fund* Org Program Class Budget Line A  *Charge detail codes must map to either a self-supporting [auxiliary] or agence Requestors Signature:  Approving Official Name:  Approving Official Signature:  Student Account Office Only Below This Line  Detail Code:  Type: Charge/Payment Category:  Grant Type:  Grant Type:  Receipt:  Receipt:  Active:  Budget  Class  Budget  Tax Type:  Adiyear Based:  Tax Type:  Title IV:  Grant Type:  Like Aid Year:  Inst Charge:  Exclude Inv  Payment Hi	ode description or COA $\square$
Please enter the description to be used in Banner (30 characters max). This is the customer's bill:  Provide Accounting Distribution for Revenue:  Account Fund* Org Program Class Budget*  Line A  *Charge detail codes must map to either a self-supporting [auxiliary] or agence	ds to be changed, or a detail
Please enter the description to be used in Banner (30 characters max). This is the customer's bill:  Provide Accounting Distribution for Revenue:  Account Fund* Org Program Class Budget in ine A Budget in ine A Budget ine A Bu	
Please enter the description to be used in Banner (30 characters max). This is the customer's bill:  Provide Accounting Distribution for Revenue:  Account Fund* Org Program Class Budget in Enter a Self-supporting (auxiliary) or agence in Enter a Self-supporting (auxiliary) or agenc	
Account Fund* Org Program Class Budget* Charge detail codes must map to either a self-supporting [auxiliary] or agence Requestors Signature:  Approving Official Name: Phone:  Student Account Office Only Below This Line  Student Account Office Only Below This Line  Oetail Code: Refund Code: Term Based: Tax Type:  Cype: Charge/Payment Direct Deposit: Aid Year Based: Tax Type:  Category: Refundable: Like Term: Title IV:  Carant Type: Receipt: Active: Like Aid Year: Inst Charge: Like Period: Exclude Inv Payment Hi	s the description that will ap
Account Fund* Org Program Class Budget*  Charge detail codes must map to either a self-supporting [auxiliary] or agence  Requestors Signature:  Approving Official Name: Phone:  Student Account Office Only Below This Line  Oetail Code: Payment Direct Deposit: Aid Year Based: Pay Type: Tax Type: Aid Year Based: Tax Type: Category: Refundable: Refundable: Itike Term: Title IV: Strant Type: Receipt: Active: Like Aid Year: Inst Charge: Exclude Inv Payment Hi	
Charge detail codes must map to either a self-supporting [auxiliary] or agence   Requestors Signature:   Phone:   Phone:   Phone:   Phone:   Student Account Office Only Below This Line   Student Account Office Only Below This Line   Pay Type:   Charge/Payment   Direct Deposit:   Aid Year Based:   Tax Type:   Category:   Refundable:   Like Term:   Title IV:   Carant Type:   Receipt:   Like Aid Year:   Inst Charge:   Charge:   Charge:   Like Period:   Exclude Inv   Category:   Payment Hi	'ear Project/Grant
Requestors Signature:   Phone:	
Approving Official Name: Student Account Office Only Below This Line    Student Account Office Only Below This Line	 / fund.
Approving Official Name: Student Account Office Only Below This Line    Student Account Office Only Below This Line	
Student Account Office Only Below This Line   Student Account Office Only Below This Line   Student Account Office Only Below This Line   Option   Code:	Date:
Student Account Office Only Below This Line  Detail Code: Refund Code: Term Based: □ Pay Type: _  Type: Charge/Payment Direct Deposit: □ Aid Year Based: □ Tax Type: _  Category: Refundable: □ Like Term: □ Title IV: □  Grant Type: Receipt: □ Like Aid Year: □ Inst Charge:  Driority: Active: □ Like Period: □ Exclude Inv  GL Enterable: □ Pay Type: _  Tax Type: Title IV: □  Brant Charge: Like Period: □ Exclude Inv  GL Enterable: □ Pay Type: Tax Ty	Email:
Student Account Office Only Below This Line  Detail Code: Refund Code: Term Based: □ Pay Type: _  Type: Charge/Payment Direct Deposit: □ Aid Year Based: □ Tax Type: _  Category: Refundable: □ Like Term: □ Title IV: □  Grant Type: Receipt: □ Like Aid Year: □ Inst Charge: _  Driority: Active: □ Like Period: □ Exclude Inv GL Enterable: □ Payment Hi	Data
Detail Code:       Refund Code:       Term Based: □       Pay Type:         Type: Charge/Payment       Direct Deposit: □       Aid Year Based: □       Tax Type:         Category:       Refundable: □       Like Term: □       Title IV: □         Grant Type:       Receipt: □       Like Aid Year: □       Inst Charges         Priority:       Active: □       Like Period: □       Exclude Inv         GL Enterable: □       Payment Hi	Date:
Type: Charge/Payment	
Tax Type:   Direct Deposit: □	Defaults
irant Type: Receipt: □ Like Aid Year: □ Inst Charge: □ Like Period: □ Exclude Inv GL Enterable: □ Payment Hi	
Priority: Active:   Like Period:   GL Enterable:   Payment Hi	Term: NOT USED
GL Enterable:  Payment Hi	
Account   Fund*   Org   Program   Class	tory: ☐ 1098T: Inc ☐ Exc ☐
Line B	