



## Expenditure Correction Form

Includes corrections for: Purchase Vouchers, Travel Vouchers, T-Card/P-Card Transactions, and Interdepartmental Transfers (IDT).

**DOES NOT INCLUDE PAYROLL CHANGES OR SCHOLARSHIPS**

For current month processing, please submit this form by the 25th day of the month.

(check one)

TO:  Accounting Services  
ap@tamuk.edu

Grants & Contracts  
OSRPostAward@tamuk.edu

DATE: \_\_\_\_\_

RESP. PERSON: \_\_\_\_\_

DEPT: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

MSC: \_\_\_\_\_

PHONE: \_\_\_\_\_

*Please correct the following expenditures as indicated. Attached is all of the required documentation.*

| Voucher Number (Ref 2) | Check Number | Bank Number | Old Account # and Object Code | New Account # and Object Code | Amount of Correction |
|------------------------|--------------|-------------|-------------------------------|-------------------------------|----------------------|
|                        |              |             |                               |                               |                      |
|                        |              |             |                               |                               |                      |
|                        |              |             |                               |                               |                      |
|                        |              |             |                               |                               |                      |
|                        |              |             |                               |                               |                      |
|                        |              |             |                               |                               |                      |
|                        |              |             |                               |                               |                      |
| <b>TOTAL:</b>          |              |             |                               |                               |                      |

**Justification for Correction:**

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|  |
|  |

Accounts beginning with 5xxxxx should be submitted to Grants & Contracts.

**Please include correspondence (emails, signatures, etc.) indicating approval from all involved departments.**

***For Office of Finance & Budget Use Only:***

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Prior Year Correction (Grants Only)

Fiscal Year: \_\_\_\_\_

Journal Entry

FAMIS A/P Entry