



LOUISIANA STATE UNIVERSITY

Louisiana State University
Finance & Administration
204 Thomas Boyd Hall

FDM REQUEST FORM – EXPENSE, LEDGER, REVENUE, SPEND

AS 600

Request Date _____

Cost Center _____

Contact Name _____

Phone _____

Email _____

Change Type

Add

Update

Delete

Inactivate

Dimension

Expense Item					
Expense Item Group			Spend Category		
Ledger Account					
Ledger Account Summary					
Ledger Account Summary					
Parent Ledger Account Summary					
Revenue Category					
Revenue Category Hierarchy					
Revenue Category Hierarchy					
Parent Revenue Category Hierarchy					
Spend Category					
Spend Category Hierarchy					
Procurement Usage	Yes	No	Supplier Invoice	Yes	No
Ad Hoc Payment Usage	Yes	No	Expense Usage	Yes	No
Trackable	Yes	No	Allocate Freight	Yes	No
Allocate Other					
Object Class Mapping		1099 Mapping		Commodity Code	
SPA Notified for Object Class Mapping					
Spend Category Hierarchy					
Parent Spend Category Hierarchy					

Purpose _____

Routing and Approval Signatures – LSU		
Accounts Payable (*Expense, Spend)	Printed Name	Date
Payroll (*Spend)	Printed Name	Date
Procurement (*Spend)	Printed Name	Date
Financial Accounting & Reporting (*All)	Printed Name	Date