### Chart of Accounts Maintenance Request (CAMR Form)

**Date:** 12/2002

**Entity**

<table>
<thead>
<tr>
<th>4</th>
<th>3</th>
<th>2</th>
<th>5</th>
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</thead>
</table>

**Unit**

**Project**

**Reporting**

**Composite Fringe Only**

- Add
- Update

**M U C U**

**Project Title**

| 50000 | 50103 | 50117 | 50118 | 50127 | 50129 | 50189 | 68811 |

**Principal Investigator (PI)**

Last Name XX, First Name Middle Initial

Note: XX = Sr, Jr, III, IV

**PI Employee Number (last 5 digits ONLY)**

**Detailed Description of Source of Funds**

2% F&A for Composite Fringe

**Detailed Description of Function**

Project required to cover composite fringe benefits expenses

**Finance Processing**

- PI KEY: 11
- UDAK REVIEW
- Person to notify when project added to the chart of accounts