Carnegie Mellon University
Finance Division

Accounts Payable Redistribution Form

Purpose: The purpose of this form is to correct charge strings on accounts payable invoices, expense reports and PCard transactions that have been paid. If you are redistributing a single transaction to more than one string, please clearly specify the amount going to each string. Credits should be entered as negative amounts on this form. To improved form processing, please attach a datawarehouse report or a screen-shot from Oracle that reflects the current (incorrect)GL/Grants string charged. **NOTE:** A datawarehouse report is *required* for all redistributions involving a <u>Grants string</u> and <u>mass GL redistributions</u> (involving 10+ transactions being moved from one GL string to another). **View instructions for completing this form here.**

Please **electronically** select the appropriate button below to indicate if you are redistributing a single transaction (from a GL or Grants string - *attachment required for Grants) OR if you are doing a mass redistribution of 10+ transactions (from a GL or Grants string - *attachment required).
*Please refer to the form instructions for more information about datawarehouse report attachment requirements.

Single Redistribution (Grants String)	Single Redistribution (GL String)	Mass Redistribution (GL, Attachment)	Mass Redistribution (Grants, Attachment)

Original Invoice Information

Invoices	Expense Reports	Purchasing Cards
Supplier Name: _____	Employee Name:_____	Cardholder Name: _____
Invoice Number: _____	ER Number: _____	PRC Number: _____
PO Number: _____	Total ER Amount: _____	Total PRC Amount: _____
PO Line Number: _____	Currency: _____	Currency: _____
Total Invoice Amount:_____	Ledger: _____	
Currency: _____		

Old (Incorrect) Grants String

Invoice Line #	Distribution Line #	Distribution Amount	Project	Task	Award	Expenditure Type	Organization Name/Number

New (Correct) Grants String

GRANTS	Distribution Amount	Project	Task	Award	Expenditure Type	Organization Name/Number

New (Correct) GL String

General Ledger	Distribution Amount	Object Code	Funding Source	Function	Activity	Organization	Entity

Business Purpose of Change:

Initiating Department Information

Signature of Preparer

Prepared by

Date

Department Name

Email Address

Phone Number

Updated by Accounts Payable: 02.01.2024

Carnegie Mellon University
Finance Division

Accounts Payable Redistribution Form

Authorization

Signature of Supervisor	Typed Name	Date
Department Name	Email Address	Phone Number

For Sponsored Funds:

Signature of Principal Investigator	Typed Name	Date
Signature of Associate Dean	Typed Name	Date
Signature of Sponsored Projects Accounting	Typed Name	Date
Signature of SPA Director/Controller	Typed Name	Date

Authorization for Transactions Less Than $250*

Signature of ALG Member	Typed Name	Date

*Not required for sponsored projects, student activities, gift/restricted account or capital purchases.

Finance Division Use

AWD Closeout?   Yes   No   AP: _____

Processed by: _____   Date: _____

When you are finished filling out this
Single Redistribution (Grants String) Form,
please click anywhere in this area to print the
appropriate pages for signature collection.

For digital signature collection, please select
the Save to PDF option in the printer menu.

Submit completed forms to Accounts
Payable at **ap-help@andrew.cmu.edu**.

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Original Invoice Information

Invoices

Supplier Name: _____

Invoice Number: _____

PO Number: _____

PO Line Number: _____

Total Invoice Amount: _____

Currency: _____

Expense Reports

Employee Name: _____

ER Number: _____

Total ER Amount: _____

Currency: _____

Ledger: _____

Purchasing Cards

Cardholder Name: _____

PRC Number: _____

Total PRC Amount: _____

Currency: _____

Old (Incorrect) GL String

Invoice Line #	Distribution Line #	Distribution Amount	Object Code	Funding Source	Function	Activity	Organization	Entity

New (Correct) GL String

General Ledger	Distribution Amount	Object Code	Funding Source	Function	Activity	Organization	Entity

New (Correct) Grants String

GRANTS	Distribution Amount	Project	Task	Award	Expenditure Type	Organization

Business Purpose of Change: _____

Initiating Department Information

Signature of Preparer _____

Department Name _____

Prepared by _____

Email Address _____

Date _____

Phone Number _____

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Signature of Sponsored Projects Accounting	Typed Name	Date
Signature of SPA Director/Controller	Typed Name	Date

Authorization for Transactions Less Than $250*

Signature of ALG Member	Typed Name	Date

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Original Invoice Information

Invoices

Supplier Name: _____

Invoice Number: _____

PO Number: _____

PO Line Number: _____

Total Invoice Amount: _____

Currency: _____

Expense Reports

Employee Name: _____

ER Number: _____

Total ER Amount: _____

Currency: _____

Ledger: _____

Purchasing Cards

Cardholder Name: _____

PRC Number: _____

Total PRC Amount: _____

Currency: _____

Old (Incorrect) GL String

Object Code	Funding Source	Function	Activity	Organization	Entity

New (Correct) GL String

Object Code	Funding Source	Function	Activity	Organization	Entity

New (Correct) Grants String

Project	Task	Award	Expenditure Type	Organization

Business Purpose of Change: _____

Initiating Department Information

Signature of Preparer _____

Prepared by _____

Date _____

Department Name _____

Email Address _____

Phone Number _____

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Signature of Principal Investigator Typed Name   Date

_____   _____   _____
Signature of Associate Dean   Typed Name   Date

_____   _____   _____
Signature of Sponsored Projects Accounting   Typed Name   Date

_____   _____   _____
Signature of SPA Director/Controller Typed Name   Date

Authorization for Transactions Less Than $250*

_____   _____   _____
Signature of ALG Member   Typed Name   Date

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Invoice Number: _____
PO Number: _____
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Total Invoice Amount: _____
Currency: _____

Expense Reports
Employee Name: _____
ER Number: _____
Total ER Amount: _____
Currency: _____
Ledger: _____

Purchasing Cards
Cardholder Name: _____
PRC Number: _____
Total PRC Amount: _____
Currency: _____

Old (Incorrect) Grants String

Project	Task	Award	Expenditure Type	Organization

New (Correct) Grants String

Project	Task	Award	Expenditure Type	Organization

New (Correct) GL String

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Date

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_____
Typed Name

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Date

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Signature of SPA Director/Controller

_____
Typed Name

_____
Date

Authorization for Transactions Less Than $250*

_____
Signature of ALG Member

_____
Typed Name

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Date

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