

Department of Finance and Administration - Office of Budget

COST CENTER REQUEST/FUNDS MANAGEMENT ASSIGNMENT

Cost Center Number:				
Valid from Date:		Valid to Date:	12/31/9999	
Cost Center Name:				
Cost Center Descriptio	n:			
Agency Responsible:				
Cost Center Category:	Operating (O)	☐ Cost Poo	I (C)	
Cost Center Address (F	Required Fields, no PO Box	(es):		
Street Address:				
Location (City):				
Region (State):	Postal Code (ZIP):	District	(County):	
Is this location within c	ity limits?		☐ Yes	☐ No
Does cost center require budget control at level lower than appropriation?			☐ Yes	□ No
Will this cost center be used to assist in the tracking of the American Recovery and Reinvestment Act of 2009 (ARRA)?				
If yes to ARRA, a - c	are required:			
a) WBS Element (statistical):				
b) Project Definition:				
c) Project Description:				
Funds Management As	signment:			
Funds Center: Business Area:				
Fund:	Functional Area:			
Hierarchy Area:		Is Hierarchy A	rea new?	Yes No
Hierarchy Area Name	(if new):			
Hierarchy Location	(if new):			
Contact Person:				
Phone Number:	E-mail	Address:		

Remit form to DFA Budget Analyst assigned to Agency:
Office of Budget, P. O. Box 3278, 1509 W 7th St., Rm. 402, Little Rock, AR 72203

Telephone: (501) 682-1941 (501) 682-1086

INSTRUCTIONS FOR COMPLETING COST CENTER REQUEST

COST CENTER DATA (ALL FIELDS REQUIRED):

Field Name	Description		
Cost Center Number	Enter 6 digit cost center number.		
Valid From Date	Enter the first day of the fiscal year for which the cost center is valid.		
Valid To Date	12/31/9999		
Cost Center Name	Enter name of cost center to be created, not to exceed 20 characters. If for the American Recovery and Reinvestment Act of 2009, must start with ARRA.		
Cost Center Description	Enter a description of the cost center, not to exceed 40 characters. If for the American Recovery and Reinvestment Act of 2009, must start with ARRA.		
Agency responsible	Enter the agency name that is responsible for the cost center.		
Cost Center category	Valid values are: O – Operating C – Cost Pool		
Cost Center Address: Street Address	Enter street address associated with cost center address.		
Cost Center Address: Location	Enter city associated with cost center address.		
Cost Center Address: Region	Enter state associated with cost center address.		
Cost Center Address: Postal Code	Enter zip code associated with cost center address.		
Cost Center Address: District	Enter county associated with cost center address.		
Is this location within city limits?	Check 'Y' if address is with city limits. Otherwise, check 'N'.		
Does cost center require budget control at level lower than appropriation?	Check 'Y' if cost center requires that the budget be controlled at a level lower than appropriation. Otherwise, check 'N'.		
Will cost center be used to assist in tracking the American Recovery and Reinvestment Act of 2009?	Check 'Y' if cost center will be used to assist in tracking the American Recovery and Reinvestment Act of 2009? Otherwise, check 'N'.		
a) WBS Element(statistical)	Enter the statistical WBS Element established for federal grant reporting of American Recovery and Reinvestment Act of 2009, not to exceed 20 characters.		
b) Project Definition	Enter Project Definition established for the American Recovery and Reinvestment Act of 2009 grant award, not to exceed 20 characters.		
c) Project Description	Enter the name of the Project Definition established for the American Recovery and Reinvestment Act of 2009 grant award.		
Funds center	Enter the funds center assigned to this cost center. Assigning a cost center will result in the funds center being derived each time the user enters a cost center. There is a one to one or many to one relationship between cost center and funds center.		
Fund	Enter the fund code assigned to this cost center. Assigning a cost center will result in the fund being derived each time the user enters a cost center. There is a one to one or many to one relationship between cost center and fund.		
Business Area	Enter the 4 digit business area, which is equivalent to the agency number preceded by a zero.		
Functional Area	Enter the assigned functional area code used for CAFR reporting.		

Field Name	Description
Hierarchy Area	Enter the appropriate cost center group within the standard hierarchy, not to exceed 10 characters.
Is the Hierarchy Area new?	Check 'Y' if a new Hierarchy Area is to be established. Otherwise, check 'N'.
Hierarchy Area Name	Enter name of new Hierarchy Area, not to exceed 40 characters.
Hierarchy Location	Enter the appropriate place where the new cost center group is to be placed in the standard hierarchy. (see example below)
Contact Person	Enter agency personnel that should be contact if any questions.
Phone Number	Enter phone number of agency contact person.
E-mail Address	Enter email of agency contact person.

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Hierarchy Location Example:

