

**FAMIS Electronic Office Request**  
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**Items in red print represent sample information**

**Complete all parts of this form. This form replaces all current information.**

*For the initial set up, you will not have access to the indicated FAMIS screens*

**Part I. Electronic Office Defaults (940)**

Before completing this section, look at Screen 940 for your FAMIS electronic office (to perform a search, type a “?” in the office field and then press the enter key). If you do not know your FAMIS electronic office name, then contact Ag Program FAMIS Security (979-862-2245). Changing the default signer will completely remove the current default signer from the routing path.

Part	Electronic Office Name	Description	Add	Change	Delete
07	DEPT	Department Name		X	

  

<b>Default Signer (required)</b>	06 or 07	Name assigned by the Ag Program to the electronic office... generally the same as the FAMIS department code.	Complete description of electronic office... generally the same as the full department name.	Select whether this is the initial set-up (Add), changing an existing office or deleting an existing office.
Joe Signer	Main signer for the unit			

**Part II. Units To Office Assignment (935)**

Before completing this section, review Screen 935 for your FAMIS electronic office. Include a department/sub-department codes (e.g., FISC/OPS) that should be assigned to this office. If you do not have any sub-departments, then use “none” as the sub-department. Be sure to include all units that are currently in your office so that the form includes all current information. Any units left off will be deleted from the electronic office.

Dept Code	Sub-dept Code	Dept Code	Sub-dept Code
DEPT			
DEPT	00001		
DEPT	00002		
DEPT	00003		

List all department and sub-department codes that are applicable to this office. Documents will not be able to be routed for any departments or sub-departments that are not listed.

*If more space is needed, attach additional sheets.*

**Part III. Creator Desk (924)**

A minimum of two creators is required for each department/unit. Creators are the individuals entering data for purchases within departments/units. Separate creator desks may be set up at the sub-department level and for different types of forms.

Name	Dept Code	Sub-Dept Code	Form
Sally Jones	DEPT		P**
Jane Doe	DEPT		***
Mary Smith	DEPT		E**

Forms refer to the type of documents that belong to a creator desk: to specify all purchasing documents, use P\*\*\*. To limit access to specific types, use: PLP(limited purchases), PEP(exempt purchases) and PRQ(purchase requisitions). To specify all payroll documents, use E\*\*\*. To limit access to specific types, use : EBR(budgeted payroll), EWR (wage payroll) and EGR (graduate assistant payroll). A creator desk with the form left blank will be responsive to all types of documents, unless a specific forms desk has been created.



Mark if they are to be a substitute approver/signer... leave blank for default approvers/signers

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Should be the whole department and sub department combination. Leave sub-dept blank if it is applicable to the whole department

**Part IV. Approvers - Optional (922)**

If your department/unit chooses to use the intermediate review process, indicate the approvers and the sub-departments. Examples of approvers may be PI's and specialists.

Name	Substitute	Dept/Sub Dept	Form	Dollar Limit
Joe Approver		DEPT 00001		
Jane Approver	X	DEPT 00001		
<p>Approvers are generally at the sub-department level, but may also be requested by a specified form (as described for the creator desk) or by dollar limitations. Any combination of sub-department, form and dollar limitations may also be used.</p>				

**Part V. Signers (923)**

Signers are the final department/unit authorization.

Name	Substitute	Dept/Sub Dept	Form	Dollar Limit
Joe Signer		DEPT		
Jane Signer	X	DEPT		
<p>Signers maybe requested by sub-department, by a specified form (as described for the creator desk) or by dollar limitations. Any combination of sub-department, form and dollar limitations may also be used.</p>				

**Part VI. Department/Unit Approval**

Name and phone number of main departmental contact

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Please Print

Approved: \_\_\_\_\_  
Department Head/Assoc. Department Head/Program Leader/Resident Director/District Extension Administrator Date

Since this is the electronic signature card, no substitute will be accepted

Printed Name: \_\_\_\_\_

Printed name of individual approving the electronic office set-up or changes