

Louisiana Tech University
Balance File Inquiry Request Form

Date: _____

To: Office of the Comptroller

Thru: _____
University Research

From: _____
Principal Investigator

Department: _____

Others needing access:

<u>Computing Center Use Only</u>	
CICS Auth:	_____
OPID:	_____
ISMENU:	_____

CICS User ID: _____

CICS User ID: _____

CICS User ID: _____

CICS User ID: _____

CICS User ID: _____

CICS User ID: _____

Please allow access to the Balance Inquiry file for the following grant(s):

____-____-____	____-____-____
____-____-____	____-____-____
____-____-____	____-____-____
____-____-____	____-____-____
____-____-____	____-____-____
____-____-____	____-____-____

This form is for *Grant Use* and requires only approval of *University Research.*