



Indian Affairs Obligation in Expired Fund Request Form

(last revised: 9/11/2017)

This form is intended for use when requesting FBMS override privileges to record an obligation in an expired fund. The policy governing this forms use can be found at: <https://www.bia.gov/policy-forms/manual>
 Completed forms must be submitted via email to the Division of Financial Reporting and Analysis (FRA). Please send to teri.lin@bia.gov and joshuar.williams@bia.gov

Section I. Requester Information		Date Form Completed:
a. Last Name:	b. First Name:	
c. Phone #:	d. Email:	
e. Requesting Region/Program:		
f. FBMS User ID of Staff Member Entering Purchase Request or Obligation into FBMS:		

Section II. Obligation Information	
a. Vendor Name:	b. FBMS Vendor Code:
c. Amount Requested for Obligation:	d. Existing FBMS Document Number(s):
e. Date Good or Service was Ordered:	f. Date Good or Service was Received:

Section III. Account Assignment Information	
a. Fund:	b. Funds Center:
c. Functional Area:	d. Commitment Item:
e. WBS:	f. Amount Available for Obligation:

Section IV. Reason For Request

Section V. Please provide a brief description why the obligation was not recorded prior to fund expiration.



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Section VI. Please explain how the obligation meets the bonafide needs rule.

Section VII. Supporting Documentation *Check all that apply*

Contract	Other:
Purchase Order	Other:
Invoice	Other:

Section VIII. Approvals

Requester Certification

I certify that the information provided is correct, all supporting documentation has been prepared and will be submitted with the request, and that the requested obligation is valid per all applicable statutes, regulations, and guidance.

<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>

OCFO, FRA Approval	Approved	Rejected (See Comments on p. 2)
<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>

Section IX. Reviewer Notes and Rejection Reason (if applicable)