

DMI CHANGE REQUEST FORM

(Disbursement Method Indicator)

Requesting agency must complete the following information before a DMI Change Request can be performed by the Comptroller's office.

Requesting Agency Name Requestor (name of individual)		
Agency #	Document #	FY
Reason For Request		
USER MUST PERFORM THIS DOCUM	IENT SELF-ASSESSMENT	
	e Accounting System (USAS), and go to the Doc the status in the top, right hand corner of the scr N	reen.
Note: If document status is not Y, then a DMI cha		
due date) listed in the document. Check identify and provide the correct due date	on the Document Transaction Inquiry (86) screet to see if each PDDT is correct. if any of the paymes below (use F8 to scroll forward on the screen umber at the end of the TRANS ID field)	nent due dates are not correct, pleas
Trans ID sequence	Correct Payment Due Date	e//
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Trans ID sequence		e//
*Click here for additional Trans ID Sequence li	nes	
Step 3: Press F11 to return to the 37 sci What is batch status? (P, H, D or A)	reen and then press F11 again to view the batch'	s details.
Note: If batch is on hold, you should be able to	correct the date and this form is not necessary.	

Note: DMI change requests should be sent to the Expenditure Assistance & Audit section of Claims Division via email at dmi.override@cpa.state.tx.us, by 4 p.m. or fax to 512-475-0588. A DMI can only be changed for an expenditure that is posted, as a payment due date error, and is a Document Type 1, 2, 3, or 9.

If you have any questions concerning this form, contact the Expenditures Assistance & Audit section of the Claims Division at dmi.override@cpa.state.tx.us or 512-475-0966.