

## **Statewide Operating Form**

Owner: Minnesota Management and Budget, Accounting Services

Number: 0702-01.1F Issued: February 2, 2017
Last Major Revision: February 2, 2017
Last Updated: April 21, 2025

## Request to Open Closed Year Appropriation and/or Reinstate Cancelled Money Form

Submitter's Name:	Submitter's Title:	
Email:	Phone:	
Agency	Budget	
Name:	Period:	
Business Unit	Purchase	
Number:	Order	
	Number:	
Appropriation	Fund:	
ID:		
Appropriation	Amount	
Name:	Requested for	
	Reinstatement	
	(If applicable)	

Please answer the following questions regarding your request for reinstatement.

MS 16A.28 subdivision 4 imposes a strict 90 day period to complete reinstatements for cancelled funds. Please allow ample time for your Executive Budget Officer to review and approve your request. If sufficient documentation or explanation cannot be provided within the 90 day window, it will not be possible to approve reinstatement requests.

1.	Were the goods ordered or services rendered before legal authority for the funding
	lapsed?

Yes No

2. What is the legal authority to spend money for the period in question?

Reinstatement under 16A.28, sub 4 – General Lapse (3 month timeframe)

## Open for Error Correction (Other Legal Authority – please specify)

3.	Does funding need to be reinstated from a cancellation?				
	Yes	No			
4.	What are the types codes for the purch	_	s involved and the corresponding account		
5.	What was the natur	e of the error(s) tha	t were made?		
6.	What steps have be	en put in place to av	oid this error in the future?		
7.	be provided. Check	the relevant boxes i	ation (AMA) transaction number is required to next to the other documentation that is nay request other additional information).		
		AMA transaction nu	umber (required)		
	Encumbrance,	/cancellation docum	nentation from SWIFT		
	Agency encun	nbrance documenta	tion		
	Other Docume	entation			

## **Agency Certification**

I have reviewed and approved this request for reinstatement to be submitted to MMB. The services, materials, or supplies to be paid for with these funds were furnished in good faith without collusion, without intent to defraud, and reinstated funds will be spent on the original purpose of the encumbrance. Attached is supporting documentation, which include copies of original invoices, encumbrance documentation and cancellation information.

Agency Head or		Date					
CFO Signature							
Signatures Required – Agency can email the Executive Budget Officer (EBO) at MMB when Agency portion is completed.							
Executive Budget Officer Approval		Date					
REQUEST DENIED		Date					
REASON							
SWIFT Module Support Approval		Date					
REQUEST DENIED		Date					
REASON							
SWIFT Module Support Use Only							
Date Opened							
Date Closed							