

## **REQUEST FOR AGENCY FUND ACCOUNT**

Requesting Agency/Individual \_\_\_\_\_

Name of Fund: \_\_\_\_\_

Budget Manager: \_\_\_\_\_

Other to have access: \_\_\_\_\_

Dean

Recommends: \_\_\_\_\_

### **APPROVAL**

\_\_\_\_\_  
Vice President's Signature

\_\_\_\_\_  
Date

**Purpose of Fund:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Income/Revenue Source: \_\_\_\_\_

Beginning Date: \_\_\_\_\_

End Date: \_\_\_\_\_

**Approved (    )**

**Disapproved (    )**

\_\_\_\_\_  
Vice President for Finance & Administration

\_\_\_\_\_  
Date

### **TO BE COMPLETED BY THE CONTROLLER'S OFFICE**

**Agency Fund Budget Unit No** \_\_\_\_\_

**Revenue Account No** \_\_\_\_\_

Copy to Requesting Individual