



REQUEST TO ESTABLISH AGENCY ACCOUNT

Name of Activity:

Purpose/Description of Activity:

Number of Participants - Children: _____ Number of Participants - Adults: _____

Person Responsible for the Account Name: _____ Title: _____

Source of Receipts (for example, Registration fees):

Purpose of Disbursements:

Is this agency account being established for a specific event? Yes No

If yes, date of event:

At conclusion of the event for which the account is established, indicate disposition of any remaining funds (for example, will funds remain in the account for future events or be transferred to another account):

If the remaining balance is to be transferred to another account, please provide the account name and number:

Is this agency account to remain active for an indefinite length of time? Yes No

If the account becomes inactive or is no longer needed, provide describe disposition of funds and provide the account name and number where disposed funds should be transferred:

Describe any additional items, or instructions for administering the agency account:

Signature/Date (Person responsible for agency account)

Approved by/Date (Dean/Director)

Received by (Business Office)

Account Number (Assigned by Business Office)