

Plant/Restricted Fund Authorization

DATE: _____

TO: Provost

FROM: _____

SUBJECT: Request to authorize new plant/restricted fund

Name of fund _____

Account number _____
assigned by Treasurer's Office

Source of funding _____

Summary of restrictions on use (attach documents)

Person(s) authorized to approve bills: _____

Budget for spending:

Date	Items	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Budget for funding: List expected source, amount and date of funding for this fund:

Budget change and description of change, if applicable:

Approved _____ Date: _____

copy to originator _____ Treasurer _____