



INTERDEPARTMENTAL MEMORANDUM

GRANT & CONTRACT ACCOUNTING, NEW ACCOUNTS

Date

To: Assistant Vice President 3917 University Way NE, Box 351122	From:	Phone:
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The following information is provided to facilitate the review and establishment of a Discretionary Fund. If approved, this fund will be administered in accordance with the University's Operating Policy Used to Administer Discretionary Fund Budgets. Additional pages are attached as necessary.

REQUEST TO ESTABLISH A DISCRETIONARY FUND

1. Source of funds and donor's purpose

2. Specific description and objectives of fund.

3. General outline and examples of the type of expenditures to be incurred.

4. Complete budget title:
Budget title: (22 spaces or less) _____

5. Person designated to administer the fund. (Please include title and phone number.)
Name _____ Title _____ Phone _____

6. Organization Code _____ - _____ - _____ - _____ - _____ - _____

7. Box number _____

Enclosure

RECOMMENDED FOR ACCEPTANCE

Signature Division/Department (if required by Vice President/Dean) _____ Date _____

Signature Vice President/Dean _____ Date _____

Signature Assistant Vice President _____ Date _____