



Departmental Agency Account Request

I request that a departmental agency account be established for the following purpose:

I understand that if this request is approved, I am responsible for ensuring that funds handling and deposit procedures are followed, (as outlined in [Departmental Agency Account Procedures](#)) and that funds are appropriately expended. I agree to notify the Accounting & Financial Reporting Office immediately in the event a change in individuals authorized to approve disbursements occurs.

Printed Name: _____

Signature / Date: _____

Department / Phone #: _____

Email: _____

Please complete and return to Accounting & Financial Reporting.

For Finance Use Only

Approved: ***(Obtain Signature Authorization Form)***

Agency Fund Title: _____

Agency Fund #: 81 _____

Denied: