

Purpose of this Form: To request a new agency funding source.

Requestor Information

Name: _____ Department: _____
Email: _____ Phone: _____

Agency Information

Agency Name: _____ Corresponding GL Organization Number: _____
Agency Contact Name: _____ Agency Contact Phone Number: _____
Agency Contact Department: _____
Is the Agency a separate legal entity? _____ If Yes, what is the Agency/Employer Tax ID Number: _____

Describe the purpose, main activities, funding (revenue) sources of the Agency. (Please attach documentation to support the funding.)

Revenue sources include dues, student activity fees, solicitation of funds (gifts & grants), federal program funds and CMU funds.

If the agency plans to solicit funds, for whom/what purposes does the donor believe the funds will be used:

What is the primary object code(s) to record the funding (revenue): _____

What is the primary object code(s) to record the expenses: _____

If multiple strings are to be used, provide the one(s) used most often

Does CMU decide how the funds will be spent or disbursed? _____

If Yes, please explain below:

Upon dissolution of the Agency, what will happen to any excess revenues or expenses?

Please attach any other pertinent information received or disseminated regarding this agency to justify its purpose. (i.e., funding solicitation advertisement or brochure, 501(c)(3) determination letter, contribution letter.

Finance Division Use

Date: _____

Approved for Agency Funding Source: Yes No

Funding Source #: _____

**Submit completed form to Financial Reporting
at fin-rptg@andrew.cmu.edu.**

Updated by Financial Reporting: 2.5.2024