

Request to Change Fund Manager Form

<u>Fulld Name</u>	<u>runa Number</u>		
			· ·
New Fund Manager		Effective Date	
Printed Name			
The authorized person(s) have agreed the guidelines.	y have read a	and understand	the spending and trust fund
The authorized person(s) agrees to recon Reporting for any questions after Trust Fo			
Signature of person(s) authorized to app	rove requisiti	ons or disburse	ements for this activity.
Fund Manager Signature	Date		Printed Name
Alternate Fund Manager Signature	Date		Printed Name
Immediate Supervisor Signature	Date		Printed Name

Trust Fund Spending Guidelines Link

Discretionary Fund Spending Guidelines Link

Spending Guidelines Link

Request To Change Fund Manager Form Instructions

Fund Manager must complete BANNER training prior to completing request change form

- #1 Complete fund name and fund code to be changed.
- #2 Print fund manager's name and effective date of change.
- #3 Download and read Trust Fund Spending Guidelines.
- #4 Read certifications.
- #5 Certify understanding and willingness to comply by signing as fund manager.
- #6 Alternate fund manager has authority to approve requisitons or disbursements.
- #7 Immediate supervisor of the Fund Manager must approve the request for change.
- #8 Send <u>completed original</u> form to Financial Reporting for final approval of the fund manager. #9

 Attach list signed by immediate supervisor and fund manager for requests exceeding 6 funds.

<u>Fund Name</u>		Fund Number	
5 111			
Fund Manager Signature	Date	Printed Name	
		<u> </u>	
Alternate Fund Manager Signature	Date	Printed Name	

Date

Printed Name

Immediate Supervisor Signature