

AGENCY ACCOUNT - NON-STUDENT ORGANIZATION
Michigan State University

(SUBMIT COMPLETED FORM WITH THE AGENCY SIGNATURE AUTHORIZATION CARD)

<input type="checkbox"/> NEW	
<input type="checkbox"/> RENEWAL	Date _____

Account Name _____
Account Number 31- _____
Name of Organization _____
Purpose of Organization _____
What is your source of Income? _____
What is University faculty or staff member's relationship to organization? _____
For what period of time will the relationship exist? _____
The organization agrees to comply with University procedures regarding receipts and expenditures. The organization also agrees that no commitments for expenditures will be made unless there is a sufficient balance in the account. We acknowledge receipt of a copy of the "Policies and Guidelines for the Establishment, Maintenance and Termination of a Non-Student Agency Account," effective July 1, 1996. ** Transactions limited to those required to conduct annual conference.

The organization further authorizes the University to forfeit any abandoned monies to general University funds. Monies will be deemed abandoned if for a period of 18 months or more no accounting transaction is made (other than monthly service fees) and no authorized organization officer notifies the University's accounting department in writing at 360 Administration Building of the organization's desire to renew the account.

Administrative Responsibility: Faculty or Staff Member (Please print) _____ Faculty or Staff Member (signature) _____ MSU Net ID & Mailing Address: _____ Department _____ College/MAU _____ Common Unit Code _____

Approved Vice President or Dean / Date: _____
Approved Controller / Date: _____