

AGREEMENT FOR ESTABLISHMENT OR CONTINUATION OF A FEE BASED UNIVERSITY TRUST FUND

1. Trust Number: <u>RT</u>	Trust Fund Name:	
2. Purpose of Trust Fund:		
3. Source(s) of Revenue:		
4. Allowable Expenditures:		
5. Agreements, Restrictions, or Reporting Requirements: Fee Advisory Committee Approval Required		
6. Course Fee: or User Fee: 7. Expected Duration: Indefinite or End Date: 8. Department ID:		
9. Disposition of Funds Upon Te	ermination:	10. Fee Amount:
11. New Fee: 🗌 or Addition to a Current Fee: 🗌 12. Primary Contact:		
Perso Typed or Printed Na		t/Encumber Funds le Signature or Electronic Signature
The above noted signatories certify they have read and agree to all financial requirements for this trust fund agreement. They confirm that any expenditure approved by the authorized signer(s) noted above will conform to University and CSU policy and follow sound budgetary and fiscal practices. Please remit finalized agreement to Financial Services, Salazar Hall, Second Floor or select the 'Submit' button on top of form. Submittal Signatures for Course Fee or User Fee Approval		
	Date	Date
Department Chair or Project Coordinat	tor Dean or Ad	lministrator Date
Associated Students School Senator		Date npus Fee Advisory Committee
Approved b	y: Presidential Signature Require	Date: ed
Financial Services Review and Approval		
Authorization Reference: ED Co		Administrative Fee:
Approved by:	Date:	Companion Fund:
		FNAT Key: