Request to Add a New Fund (RANF) – Non-Grant Funds

PART I: TO BE COMPLETED BY REQUESTING DEPARTMENT

1. **Originator Name:** _____ **Phone #:** _____

2. **Department Name:** _____

3. **Fund Name:** _____

4. **Fund Type:** (check one)

☐	Designated	12XXXX	☐	Auxiliary	3XXXXX
☐	Reserve	15XXXX	☐	Endowment	6XXXXX
☐	Restricted	2XXXXX	☐	Agency	8XXXXX

Is inception-to-date reporting needed: ☐ Yes ☐ No

5. **Persons to notify with fund code:** _____

6. **Organization Code to which this Fund will be assigned:** _____

7. **Proposed Budget:** _____

8. **Primary Purpose:** _____

9. **Source of funding for this Fund:** (check one)
☐ General Fund ☐ Gifts ☐ Endowed Spending
☐ Foreign ☐ Other - Please list _____

10. **For Disposition of any surplus/responsibility of any deficit or unallowable cost, please designate a Fund and Organization Number:**
Fund: _____ Org: _____

11. **Approvals:**
Dean, Director: _____ Date: _____
Appointing Officer: _____ Date: _____
*Executive Officer: _____ Date: _____
*For all designated, restricted, and reserve funds.

If this fund requires a dedicated P-card contact the Procurement Department.

12. **Additional Information:** _____

PART II: TO BE COMPLETED BY THE CONTROLLER'S OFFICE

Fund Code: _____ Predecessor Code: _____
Effective Date: _____ Default Org Code: _____
Fund Type: _____ Default Program Code: _____
Grant Code-if applicable: _____