## **FUND REQUEST**

AGENCY NUMBER							FUND NAME						
AGENCY NAME							STATUTORY AUTHORITY						
ADD/CHANGE						Fund Number							
1. What is the use of the fund?						CHANGE							
						Reason for change							
						Effective D	oate						
						TERMINATE							
Indicate Parent Fund (If applicable)      Can this fund be invested?YesNo     If yes, please complete an INVESTMENT AUTHORIZATION Form							Fund balance transferred to fund     Reason for termination      Document Number     Termination Date						
				AS S	STATE A	CCOUNTIN	G ONLY						
<u>FUND</u>	CONTROL <u>AG</u> <u>DIV</u>	ADD BOOK	ORG <u>FUND</u>	BAL SHEET BU	ATTACH OBJECTS	CAT CODE 21	G/L <u>CLASS</u>	AAI'S	DEPR. CODING	RNV	PAYROLL <u>AAI'S</u>	COMMIT RELIEF	
Description:					ACFR Fund				ACFR Function				
AGENCY						AS BUDGET			AS STATE ACCOUNTING				
DIRECTOR DATE				Comments:  REVIEWED BY DATE				-	Granted Denied Date				
DIRECTOR DATE				1		DI DVIC			ACCOUNTING ADMINISTRATION DATE			··-	