



Assigned Agency Account Number

Fund

Dept

Account

ALBANY STATE UNIVERSITY **INSTRUCTIONS FOR ADMINISTERING AN AGENCY ACCOUNT**

Agency funds by definition are funds held on deposit by an institution on behalf of an organization or unit of this institution acting as custodian or fiscal agent. These funds are deposited with the institution for safekeeping, to be used or withdrawn by the depositor at will. These funds may be held on behalf of students, faculty, staff organizations or some other third party. Under no circumstances shall agency accounts be allowed to operate in a deficit.

Name of Account: (No Abbreviations Please)	Type of Organization/Activity:		
Purpose of The Organization/Activity:			
Name of Person(s) Who shall Have Signatory Authority: (Please Print)		Address:	
		Contact Phone NO:	
If different from above, name person who will authorize purchase requisitions:			
Funds receipted into account will be obtained from) i.e., registration fees):			
Is this account being established for a specific event (i.e., conference)? ☐ Yes ☐ No If yes, state when the event will be held			
At the conclusion of the event for which the account was established, indicate what should be done with any balance remaining in the account:			
Provide the following information if a check is to be prepared: Federal ID No.: Check payable to:			
Mail Check to: (Include Address)			
Agency accounts that remain active for an indefinite length of time must have a provision describing procedures for the disposition of the balance in the account if the organization or activity for which the fund was created, becomes inactive or no longer is needed. Describe the policy for the disposition of the balance of the funds. If no stated policy is given for the disposition of the remaining balance and there is no activity in the account for at least one year, then ASU reserves the right to dispose of the remaining balance as deemed necessary.			
_____ (Authorized) Advisor's Signature		_____ Student's Signature	
_____ Advisor's Name: (Please Print)		_____ Student's Name: (Please Print)	
Approved By Accounting: _____		Date: _____	