

NEW FUND REQUEST or FUND NAME CHANGE

SECTION A (To be completed by Department requesting)	
DATE OF REQUEST	
PERSON REQUESTING	
DEPARTMENT REQUESTING	
NEW FUND NAME	
IF FUND NAME IS BEING CHANGED, ENTER FUND NUMBER	
GRANT MONIES RECEIVED?	Yes No
GRANT NUMBER ASSIGNED (IF ABOVE ANSWER IS YES)	
IS AUTHORIZED SIGNATURE AN OFFICEHOLDER or DEPT HEAD?	Yes No
AUTHORIZED SIGNATURE	
EXPLANATION(IF APPLICABLE):	
SECTION B (To be completed by County Auditor)	
DATE REQUEST APPROVED	
AUDITOR'S SIGNATURE	
SECTION C (To be completed by Bookkeeping in Auditor's Office)	
NUMBER ASSIGNED TO NEW FUND	
TYPE OF FUND (circle one)	BUDGET CASH
IS THIS FUND TO BE INVESTED? (circle one)	YES NO
DATE ENTERED INTO SYSTEM	