

Washburn University and Washburn Institute of Technology
Agency Account Signature Authorization Form- Student Organization

Part I - Organization Information

Organization Name:	
Account Number:	
Responsible Department:	
Faculty/Staff Advisor:	
Today's Date:	

Part II - Officer/Advisor Information (print all but signatures)

Acknowledgements and Authorizations:

By our signatures below, as officers and advisor of this organization, we acknowledge that we are **responsible for any financial obligations** incurred by this organization **and for any overdraft** in this University agency account. We also acknowledge that we have received a copy of the University policy and rules governing agency accounts, and that we understand said policy and rules.

The organization authorizes the University to forfeit any abandoned money to the University general fund. Money will be deemed abandoned if no accounting transactions are made for a period of 18 months or more, and no authorized organization officer or advisor notifies the University's Accounting Department in writing at Morgan Hall, Room 211, of the organization's desire to maintain the account.

Officer's Title:	
Name:	
WIN Number:	
Local Telephone & E-mail:	
Signature and date:	

Officer's Title:	
Name:	
WIN Number:	
Local Telephone & E-mail:	
Signature and date:	

Officer's Title:	
Name:	
WIN Number:	
Local Telephone & E-mail:	
Signature and date:	

Advisor Name:	
Local Telephone & E-mail:	
Signature and date:	

Send completed form to: Finance Office ♦ Morgan Hall, Room 211

FOR FINANCE OFFICE USE ONLY

Received By	Date

Controller / Director of Accounting	Date