



# REQUEST FOR AGENCY ACCOUNT FORM

Before completing the form:

1. Familiarize yourself with UCD Policy and Procedure Manual [330-09](#).
2. Read the information about agency accounts at: <http://accounting.ucdavis.edu/ga/agencyaccounts.cfm>.
3. If creating a new agency account, complete a KFS Account document. Use UC Account 899999 and UC Fund 00002.
4. If reactivating an expired agency account, complete a KFS Account document to remove the expiration date and make other changes as needed. If there are no changes to the existing agency account request form, you don't need to complete the form below.

**1. Agency account information:**

KFS Document #: 01-\_\_\_\_\_  
 KFS Account #: \_\_\_\_\_

**2. Sponsor (Non UCD Principal if external sponsor; can be UCD principal if university event such as retirement party) for whom Accounting & Financial Services will be acting as a fiscal agent:**

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**3. Person authorized to approve financial system (e.g., KFS) transactions for the account:**

Name: \_\_\_\_\_ Department: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**4. Relationship of the sponsor to the University:**

- Organization/society for faculty or staff       Student organization  
 Visiting scholar       Other (describe): \_\_\_\_\_

**5. Describe the activity or project for which agency account service is requested:**

\_\_\_\_\_

**6. Event information (complete if activity is conference, workshop, or special event)**

Event Title: \_\_\_\_\_ Date(s): \_\_\_\_\_  
 Location: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Contact: \_\_\_\_\_

**7. Method(s) of collecting funds to be placed in agency account (check all that apply)**

- Admission       Sales (describe): \_\_\_\_\_  
 Conference registration       Dues  
 Principal       Other (explain): \_\_\_\_\_

**8. Will there be a deposit of \$5,000 or more at any one time? Yes  No**

Note: If a deposit of \$5,000 or more, send supporting documentation to Internal Control with a copy to General Accounting.

**9. Are any of the following desired? (check all that apply)**

- Scholarship and fellowship administration service through Accounting & Financial Services  
 Services provided through Conference Event Services (CES)  
 Other (describe below; payroll services for non-University employees are not allowed)

\_\_\_\_\_

**10. Any balance remaining in the agency account after completion of the activity will be disbursed as follows:**

- Refund to the principal named in question 2. If that's not feasible, then pick a different option below.
- UCD gift fund # \_\_\_\_\_ and account number if known. The sponsor listed in #2 agrees that this transfer will represent an irrevocable charitable contribution to the University and therefore, once closed, funds may not be refunded. Account # \_\_\_\_\_
- UCD miscellaneous income account (used at the discretion of **the chancellor**).

**11. Unless an exception has been granted by General Accounting, a positive cash balance will be maintained by the individual named in question 3 above. Any deficit will be cleared promptly as follows:**

- Payment from the principal named in #2
- Additional funding from the provider of the original funds
- Other (explain and include account number or other specific information): \_\_\_\_\_

**Certifications**

My signature below certifies my understanding that the University does not exercise any direct fiscal control over the use of these funds, that I agree to the terms and conditions under which the University of California provides agency account service and that I am responsible for all costs associated with this activity.

**Principal's Signature**  
(person listed in #2) :

\_\_\_\_\_ **Date:** \_\_\_\_\_

The principal *must certify* responsibility for the activity and understanding of the University's limited role in the disbursement of the funds. If it is impractical for the principal or the principal's authorized employee to sign the Request for Agency Account form, attach a written document from the principal or principal's authorized employee denoting: (1) acceptance of financial responsibility for the activity and (2) authorization for the UC Davis department or individual identified in question 3 to disburse funds on behalf of the principal. The documentation can be in the form of an e-mail or a letter but must be signed by the principal or by the principal's agent.

I certify that I have read [UCD Policy & Procedure Manual Section 330-09](#) and agree to the terms and conditions under which the University of California provides agency account service.

**Authorized Approver's**

**Signature: (person listed in #3):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Department Head Signature,**  
**if a faculty activity:**

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Send completed form to campus Accounting & Financial Services (A&FS), General Accounting Division.**

**Approvals – Obtained by General Accounting**

\_\_\_\_\_  
Senior Assoc. Vice Chancellor – Human Resources

\_\_\_\_\_  
Director – Conference and Event Services

\_\_\_\_\_  
Associate Vice Chancellor for Student Life, Campus  
Community and Retention Services

\_\_\_\_\_  
Associate Vice Chancellor – Finance/Controller