REQUEST FOR AGENCY BUDGET

Complete the form and send it to the Controller's Office (P.O. Box 5143)

City:	State:	Zip:	
	State.	Z.ip	
. Relationshi	p of Principal to the University:		
	Faculty or staff organization	☐ Faculty or staff professional soc	eiety
	Student Organization	☐ Other (describe):	•
. USM Spons	sor for Agency Budget/Approver:		
Name:			
Payroll Title:			
Department: USM ID			
E-mail:		Phone Number:	_
			_
4 TICK # CL 00:	D 1 4 C 4 4		
1. USM Staff/ Name:	Budget Contact:		
Department:			
USM ID			
E-mail:		Phone Number:	
			_
5. Additional	Signature Authorities on Agency Budget:	USM ID:	
Vama.			
		USM ID:	
Name:		USM ID:	
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Name:6. Description		USM ID:	
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Name:	of the activities or projects for which the agests or agreements. mation (complete if activities will include con	USM ID: ncy budget service is being requested. A ferences, workshops, or special events)	
Name:	of the activities or projects for which the agests or agreements. mation (complete if activities will include con	USM ID: ncy budget service is being requested. A	
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Name:	of the activities or projects for which the age ts or agreements. mation (complete if activities will include con ent: conf collecting funds to be placed in agency but Admission Conference Registration	Phone Number: Sales of: Dues Other (explain):	ttach a

	Purchase of materials and se	ŭ	· ·		
	Scholarship and fellowship	administration service	s through Student Fina	nncial Aid Services	
	Payroll Services through Hu	ıman Resources (descr	ibe below)		
	Services provided through (Conference, Events & l	Info Services		
	Other (describe below)				_
	necessary exception is in pla	the agency budget af		positive balance at all times to be activity will be disbursed as	
B.		e individuals named in as follows: amed in question 2 other Principal. scientific organization		ove, to remove any deficits in a	timely
C. Certification	It is the responsibility of the when an Agency relationship	e individuals named in ip has terminated.	questions 3 and 4, abo	ove, to notify the Controller's O	
I certify that I and Agency account		ms and conditions und	ler which the Universi	ty of Southern Mississippi prov	ides
Requestor	's Signature:			Date:	
Print Requ	uestor's Name:				
		Approva	als		
The Principal		Date	University Sponsor	Date:	
Department Cl	nair/Director/Dean	Date	Tax Compliance	Date:	
Senior Accoun	tant	Date	Controller	Date:	
	Controller's Office Use	Only			
Budget Strin		Department ID	Program Code	HR Number	
Assigned	b I unu	Dopuration ID	1 Togram Code	THE FURIOUS	

APPENDIX A

Budget Title:

In your narrative description of the daily activities of the new or existing fund please address the questions listed below.

1) Background information.

Why did we choose to enter into this agreement? How does it contribute to the mission of the university?

2) What is the source of the revenues?

If it was a fundraiser, was it hosted on or off campus? Who footed the cost of the fundraiser was it the USM or the non-University entity? If we paid the up-front costs for a fundraiser when were we reimbursed?

3) Who is involved in making the decision as to how the funds will be spent?

Does the independent entity include us in the decision making process? To what extent are we involved in the decisions?

4) Do we turn over all monies received from the independent entity to the designated recipient?

Do we retain a portion for our out of pocket costs? If so, what were the funds retained for? Do we retain a buffer, to guard against a deficit balance in the account?

5) Are there any tax related transactions?

Do you withhold sales taxes? Do you withhold payroll related taxes?

Do you have vendors who will require Form 1099? (We may need to inform the IRS of payments paid to vendors for services provided)

6) Do we benefit from the funds in the agency budget?

Is anything purchased for USM?
Is it used to pay for services provided by USM?

7) Under what scenario would your budget have a deficit balance?

Do you have pay up-front fees to secure a venue or registration fees before you actually start receiving fees from the participants? For example, you book a conference center but the attendance was lower than expected. As such, the fees received from the participants do not cover the venue charges.