

Restricted Account

ACCOUNT NUMBER (FOUNDATION USE)

The following information, filled out, is necessary to establish a restricted account with The Foundation for Pierce College. This information assists the Foundation in its audits, preparation of tax reports, and timely and accurate disbursement of funds.

Please complete the following (typed if possible):

ACCOUNT DETAILS

NAME OF ACCOUNT	DEPARTMENT	
PERSON AUTHORIZED TO SIGN ON ACCOUNT	DEPARTMENT CHAIR	
ADDRESS	CITY	ZIP
PHONE	EXTENSION	FAX
PURPOSE OF ACCOUNT		

AUTHORIZATIONS

Authorized signer

PRINTED NAME	SIGNATURE	DATE

Department chair

PRINTED NAME	SIGNATURE	DATE