



ACCOUNT APPLICATION FORM

California State University, Dominguez Hills Philanthropic Foundation (CSUDHPF) is a non-profit corporation that is an auxiliary of California State University, Dominguez Hills (CSUDH) under the agreement with the CSU trustees and is exempt from Federal income tax under section 501(C)(3) of the Internal Revenue Code. CSUDHPF is the sole repository for philanthropic contributions from individuals, corporations, foundations, and other organizations in support of activities and programs of California State University, Dominguez Hills.

Funds must be used to benefit the University, a campus program, students, or an authorized faculty activity.

Accounts must comply with the guidelines, policies, and procedures of California State University, Dominguez Hills Philanthropic Foundation.

The account will automatically expire three (3) years from the date of its opening, at which point any remaining funds will be disposed of in accordance with the account application. Account holders must renew their accounts prior to expiration.

Complete all sections and return to Office of Advancement Services, Welch Hall A425

If you have any questions or need assistance, please contact Director of Advancement Services at (310) 243 - 2673 or email vnghuyen@csudh.edu

| | |
|--|--|
| Requestor: <input style="width: 90%;" type="text"/> | Account Number: <input style="width: 90%;" type="text"/> |
| Department: <input style="width: 90%;" type="text"/> | Phone/Ext: <input style="width: 90%;" type="text"/> |

ACCOUNT APPLICATION TYPE

Establish New Account. Account Name: (23 Characters Only)

SOURCES OF FUND

Contributions (Gifts) Other:

PURPOSE OF ACCOUNT For Endowment Accounts, Choose Two: Endowments (Principal) and either Campus Program or Scholarships for your Spend Account. **Please Note:** Scholarship Accounts Can Only Expense Scholarships

Campus Program Endowments
 Scholarships Grants

ACCOUNT CATEGORIES

- | | |
|---|--|
| <input type="checkbox"/> Current Operations - Unrestricted | <input type="checkbox"/> Capital Purposes - Endowment: Income Restricted |
| <input type="checkbox"/> Current Operations - Restricted | <input type="checkbox"/> Capital Purposes - Loan Funds |
| <input type="checkbox"/> Capital Purposes - Property, Building, & Equipment | <input type="checkbox"/> Deferred Giving |
| <input type="checkbox"/> Capital Purposes - Endowment: Income Unrestricted | <input type="checkbox"/> Scholarship Only Accounts |

For Endowments only:

Permanent Term Quasi

DESIGNATED DIVISION

- Academic Affairs
- Administration and Finance
- Associated Students Inc.
- Athletics
- Information Technology
- President's Office
- Student Affairs
- University Advancement
- Other

DESIGNATED COLLEGE

- College of Arts and Humanities
- College of Business Administration & Public Policy
- College of Education
- College of Extended and International Education
- College of Health, Human Services and Nursing
- College of Natural & Behavioral Science
- Library
- California Academy of Math and Science (CAMS)

Instructions For Closing Account (Required)

Transfer to Related Fund (Acct. Name/#)

Transfer to State Trust Fund (Acct. Name/#)

Permanent Cannot be Closed



Fund Purpose and Description of Restrictions on use of Gifts and/or Endowment Income:

Do NOT Complete this Section for Scholarship Only Accounts
Allowable Expenditures (If Account Is Restricted Must Check ALL Allowable Expenditures)

- | | | |
|---|--|---|
| <input type="checkbox"/> Salaries and Wages | <input type="checkbox"/> Travel | <input type="checkbox"/> Fringe Benefits (Faculty Release Time) |
| <input type="checkbox"/> Stipends | <input type="checkbox"/> Consultants | <input type="checkbox"/> Telephones/Communication Device |
| <input type="checkbox"/> Supplies | <input type="checkbox"/> Computers/Tablets | |

State any other allowable expenditures not included in the list above:

Restrictions Alert (List important restrictions/ donor requested restrictions)

ACCOUNT SIGNERS FOR DISBURSEMENTS/CLOSING ACCOUNTS (Account Director, ARM/Fiscal Officer, Dean/Division Head)

Signer 1:

Name of Account Director
(Primary, responsible for account)

Title

Signature

Signer 2:

A.R.M./Fiscal Officer

Title

Signature

Signer 3:

Dean/Division Head
(Must Sign To Approve Account)

Title

Signature

Signer 4: (not required)

Additional Signer

Title

Signature

Check Requests/Purchase Orders for withdrawal of funds from this account must be signed by two signatories listed above in accordance with Philanthropic Foundation Policy. Amounts over \$750.00 must receive Dean/Division Head approval.

APPROVAL OF ACCOUNT:

University CFO

Signature

Date

Philanthropic Foundation

Signature

Date

Foundation

Signature

Date

Philanthropic Foundation



Primary Signatory Agreement

As a primary signatory for a California State University, Dominguez Hills Philanthropic Foundation account, I understand and agree that

I am responsible to reasonably ensure the following:

- All fundraising efforts by my department will be cleared with University Advancement for compliance with any Federal, State, CSU, and CSUDH requirements or restrictions.
- Donor restrictions on gift deposits to a CSUDHPF account must be consistent with the established purpose of the account. The CSUDHPF maintains various accounts for University departments as a technique for efficiently managing donor-imposed restrictions on funds.
- Donors should be instructed to make checks payable to the California State University, Dominguez Hills Philanthropic Foundation or CSUDHPF. Any funds that rightfully belong to the State will *not* be deposited with the CSUDHPF. Essentially, checks made payable to the University or one of its departments or programs cannot be deposited into the CSUDHPF.
- All withdrawal requests and transfers must be consistent with donor intent and compliant with any Federal, State, CSU, CSUDH, CSUDHPF and account restrictions/directives. Withdrawal requests will include a detailed explanation of the business purpose of the withdrawal with sufficient explanation to demonstrate that the transaction is consistent with the University's educational mission. For payment of invoices, original documentation should accompany the check request.
- I understand that interest earnings for Campus Programs and Scholarship accounts are retained by CSUDHPF to cover its operating costs; that other fees may be charged based on the CSUDHPF Policy on Administrative Fees.
- As the primary signatory, I understand that I am responsible for the monthly reconciliation between departmental records and the CSUDHPF accounting printouts and will work with the CSUDHPF to correct any discrepancies in a timely manner.

California State University, Dominguez Hills Philanthropic Foundation is an auxiliary organization of California State University, Dominguez Hills. As such, the CSUDHPF is obliged to manage all funds pursuant to applicable State, CSU, and CSUDH policies and procedures.

Type of Print Name of Primary Signatory (Account Director)

Signature of Primary Signatory
Date

For Advancement Services Office Use Only:

Fund ID:

VSE PURPOSE:

- | | | |
|--|--|--|
| <input type="checkbox"/> CO - Academic Divisions | <input type="checkbox"/> CO - Other Restricted | <input type="checkbox"/> CP - Endowment Restricted |
| <input type="checkbox"/> CO - Athletics | <input type="checkbox"/> CO - Public Service & Extension | <input type="checkbox"/> CP - Endowment Unrestricted |
| <input type="checkbox"/> CO - Faculty and Staff Compensation | <input type="checkbox"/> CO - Research | <input type="checkbox"/> CP - Loan Funds |
| <input type="checkbox"/> CO - Library | <input type="checkbox"/> CO - Student Financial Aid | <input type="checkbox"/> CP - Property Building |
| <input type="checkbox"/> CO - Operation & Maintenance of Plant | (Scholarship) | |
| | <input type="checkbox"/> CO - Unrestricted | |

UA Use Only (Financial Designation):

- | | |
|---|--|
| <input type="checkbox"/> Institutional/Compensation | <input type="checkbox"/> Institution Support |
| <input type="checkbox"/> Research | <input type="checkbox"/> State Grants/Scholarships |
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Auxiliary |
| <input type="checkbox"/> Student Services | |

Foundation Use Only:

Dept. #: Officer: Entity: Fund:
 School: College/Division: Function:

Signature
Date

ADVANCEMENT SERVICES OFFICER