

REQUEST FOR TRUST ACCOUNT

A. NAME OF COLLEGE/ DEPARTMENT/ UNIT

B.1. Name and or Nature of Project/ Program/ Trust Fund

2. Trust Account Code (Please do not fill.)

C. SOURCES OF FUND (Please elaborate sources).

D. JUSTIFICATION (What will it achieve?)

E. PURPOSE OF THE TRUST FUND (Please elaborate. This will be the basis of expenditure approval)

1. PRIMARY

2. SECONDARY

F. REQUESTING PARTY

G. ACTION TAKEN/ FPOC TAKEN

Recommending Approval/ Disapproval (please encircle)  
Per FPOC meeting of \_\_\_\_\_

\_\_\_\_\_  
VIRGINIA C. YAP  
Vice Chancellor for Administration/ FPOC Chairman

Approval/ Disapproval:

\_\_\_\_\_  
CAESAR A. SALOMA, PhD  
Chancellor