**SECTION I. DEPARTMENTAL INFORMATION**

Contact Name: Click here to enter text.Email:Click here to enter text.Phone: Click here to enter text.Date: Click here to enter a date.

Department Name: Click here to enter text. DeptID: Click here to enter text. New[ ]  Existing[ ]

Detailed explanation of collection of funds activity/invoicing activity: Click here to enter text.

Provide Department name for any residual funds/deficit [if any] at termination of activity? Click here to enter text. DeptID# Click here to enter text.

Department Head/Director (Signature): Title: Click here to enter text.Date: **Click here to enter a date.**

Dean/AVP (Signature): Title: Click here to enter text. Date: Click here to enter a date.

**SECTION II. COLLECTION/INVOICING DETAILS**

YES/NO QUESTION

Choose an item. Will this be an on-going activity/event?

Choose an item. Will this be an annual activity/event?

Choose an item. Is the department/center aware of/familiar with JMU FPM Section 4105: Deposits?

Choose an item. Does the department have a safe or the appropriate level of secure, restricted access storage required per FPM 4105.210 for storing deposits overnight when collected at end of day?

Choose an item. Is this related to a Sponsored Program? If yes, indicate Deptid# Click here to enter text.

Choose an item. Does the department/center currently have authorization to collect funds? If yes, indicate Deptid# those funds are deposited toClick here to enter text.

Choose an item. Are you aware there is a requirement to use the standard JMU invoice?

Choose an item. Are you currently issuing JMU Invoices?

**SECTION III. FINANCE APPROVAL/RECOMMENDATIONS**

[ ] Approve with conditions: Click here to enter text.

[ ] Approve only with criteria of compliance with university policies and procedures.

Director, Cash & Investments DateClick here to enter a date.

Associate Vice President for Finance DateClick here to enter a date.

2/22/19

Cash & Investments Use Only:

[ ] Approvals Completed [ ] Spreadsheet Updated [ ] Copy to Financial Reporting [ ] Original Filed [ ] Department Notified