New Fund Number Request (for funding >= \$5,000) Note: For funds < \$5,000 contact Charlene Bellows x5577 or cbellows@wpi.edu

SEND COMPLETED FORM TO CHARLENE BELLOWS, ASSOCIATE CONTROLLER, Boynton Hall, 2nd Floor SEE PAGE 2 FOR INSTRUCTIONS

Section I:	REQUESTOR INFOR	MATION					
Date:	Reque	estor Name:		Title:			
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Gifts			nned Giving:	Contracts (n	on-OSP):	Fees:	
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	_Building/Renovation	-	Balance Income	Found	ation	Program Tuition	
	_Department	_	Pooled Income	Fortament Toront			
	_Program Support		Beneficial Interest in	external trust			
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		-	t student clubs & organiz				
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C OI I	(Title in	Banner is limited to 3	35 characters)				
3 Financia	l Manager Name			4 Funding A	mount:		
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