



REQUEST FOR APPROVAL OF FUNDRAISING/DEVELOPMENT EVENT OR ACTIVITY

REQUESTING DEPARTMENT/UNIT _____

DESCRIPTION OF EVENT OR ACTIVITY

Please complete the following required information regarding the fundraising/development event or activity for which approval to deposit proceeds in an LSU Foundation beneficiary account is requested.

Description of event/activity _____

Type of revenues to be deposited (e.g., registration fees, merchandise sales) _____

Fundraising or Development Purpose _____

Date(s) of event or activity _____ Check if Annual Event

Foundation beneficiary project account _____

If costs are to be paid using State funds, explain justification for placing revenues in Foundation account _____

DEPARTMENT/UNIT ADMINISTRATOR:

NAME _____ TITLE _____

SIGNATURE _____ DATE _____

CAMPUS APPROVAL

Signature below indicates campus approval of this request to deposit proceeds from the event or activity in an LSU Foundation beneficiary account, and certifies that the event or activity is principally being conducted for fundraising or development purposes.

Dean / Major Unit Director _____
(for AgCenter: Vice President and Dean)
(for Law Center: Chancellor)

Date

Route to the Bio & Gift Records team