

Fund 233 Gift Account Form

Requested By:			Title:			
Email:			Phone:	Phone:		
Department:			Requested	Requested Date:		
Request Type:	New	Revision	Close			
)-character acco			es it is a gift from the UWL Fo aracter Foundation Fund acco		
Account Name: UN	/LFAcco	ount Description (20 charact	ers maximum)	Foundation Fund (XX##)		
Business purpose t	hat funds will be	used for:				
			-	ompletion of this account requ		
Business Manager:						
Budget Office:						
Foundation: Marcu	s Buchholz and	Kyle Slaby				
Grant Accountant:	Rachel Hoskins					
Department Admini	strative Support	:				
Others in Departme	ent:					
WISER Manager P	rinted Name:					
WISER Manager S (No Designees)	gnature:			Date:		
Forward completed	request to Busi	ness Services, 125	5 Graff Main Ha	all.		
BUSINESS SERVICES 125 Graff Main Hall 1725 State St. La Crosse, WI 54	601 USA	phone 608.785.8554 fax 608.785.8544 www.uwlax.edu/business-	services/		Revision 4/26/2021	

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