

**TRUST/SPECIAL PROJECT AGREEMENT**

CSUSM.200-1 (REV.4/2008)

FUND NUMBER <b>4XXXX</b>	TRUST/PROJECT NAME <b>FUND TITLE</b>	DEPT-CLASS <b>XXXX</b>
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PURPOSE OF FUND  
*Describe purpose of Trust Fund here.*

SOURCE OF REVENUE <i>Specify source of revenue to be received (Student Fees, Off-Campus Users, Donation, Other: explain)</i>	AUTHORIZATION REFERENCE <i>Indicate ED Code #, Exec Order #, etc</i>
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METHOD OF REVENUE COLLECTION  
*Specify how the revenue will be collected (chargeback, grant, billing, student fees/payment, etc.)*

TYPE OF EXPENDITURE FROM FUND  
*Describe the type(s) of expenditures permitted from this fund.*

SPENDING RESTRICTIONS:  
*Indicate expenses that are NOT permitted i.e. Salaries, Travel, Overhead, etc or NO Restrictions*

AGREEMENTS and/or REPORTING REQUIREMENTS:  
(LIST DETAILS FOR THIS FUND - i.e. Outside Agency Reporting, Required Forms, Contacts, Due Dates, etc.  
Attach supporting documentation i.e. Agreement, Award Letter, etc)

EXPECTED DURATION OF PROJECT (PLEASE INDICATE END DATE OR "INDEFINITE"):  
*End Date or Indefinite*

DISPOSITION OF FUNDS UPON TERMINATION OF PROJECT (APPROVAL REQUIRED BY DIRECTOR, ACCOUNTING & TECHNOLOGY SERVICES)  
*Transfer to University Discretionary Trust upon termination of project.*

**AUTHORIZED SIGNERS FOR DISBURSEMENT:**

By signing below, I confirm that any expenditure activity authorized under this designation will conform to California State University, San Marcos and CSU Trustee policy, specifically Trust Fund Procedures, and sound fiscal and budgetary practices. By signing this form, I understand that this expenditure authorization may be rescinded at any time, without notice, at the discretion of management.

NAME/TITLE	SIGNATURE/DATE
1. _____	_____ / _____
2. _____	_____ / _____
3. _____	_____ / _____

ADDITIONAL AUTHORIZED SIGNERS LISTED ON PAGE 2. (Please check the box if more than three are authorized.)

**SUBMISSION AND APPROVAL:**

BY SIGNING BELOW, I VERIFY THAT I HAVE READ AND AGREE TO THE TERMS OF AGREEMENT AND THE ACCOUNT MANAGEMENT RESPONSIBILITY POLICY.

Those named above are designated to act on behalf of the Account Manager for fiscal expenditure and are hereby authorized to submit requisition and disbursement documents. The Account Manager retains the responsibility for all activity appearing in the University’s financial record for their Trust Funds per the Account Management Responsibility and Trust/Special Projects Submittal Guidelines. TERMS OF AGREEMENT are on the reverse side (Page2).

- UHIHUHQFH=i Account Management Responsibility: [http://www.csusm.edu/policies/active/documents/account\\_management\\_responsibility.html](http://www.csusm.edu/policies/active/documents/account_management_responsibility.html)
- Trust/Special Project Guidelines: <http://www.csusm.edu/budgetoffice/trusts.html>
- Trust Fund Administration Procedures: [http://www.csusm.edu/policies/active/documents/trust\\_fund\\_administration.html](http://www.csusm.edu/policies/active/documents/trust_fund_administration.html)

SUBMITTED BY _____ / _____ <i>Account Manager</i>	DATE	REVIEWED BY _____ / _____ <i>Trust Fund Accountant</i>	DATE
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APPROVED BY _____ / _____ <i>Dean/AVP/Administrator</i>	DATE	REVIEWED BY _____ / _____ <i>University Controller</i>	DATE
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APPROVED BY _____ / _____ <i>Provost/Vice President</i>	DATE	Signature on page 1 <b>signifies acceptance</b> of the ACCOUNT MANAGEMENT RESPONSIBILITY and TERMS OF AGREEMENT (TERMS on page 2).

## TERMS OF AGREEMENT

All fiscal transactions will be administered in compliance with the directives issued  
by Departments of The State of California, Trustees of the California State University.

1. All funds collected will be held and applied according to the purpose for which the project was established.  
Good business practice will be exercised in all transactions affecting the project. Each obligation will bear the authorization of an individual named in this agreement.
2. All property, equipment and supplies shall become the property of the State and will be recorded, inventoried and accounted for as such. In the event the project is dissolved all assets shall become State property subject to disposition of same.
3. The Project's annual budget for each subsequent year must be submitted one month prior to the beginning of the fiscal year.
4. The Account Manager must review a monthly Trust Fund Trial balance report and a reconciliation with his/her records. If they do not agree, CSUSM Accounting Office should be notified in writing. If no objections are received then the records are deemed to be in agreement. The Account Manager will sign, date and retain reconciliation records for internal audit review purposes.
5. Executive Order # 1000 establishes Trust Fund policy including the need for the operating fund to recover allowable direct costs plus an allocable portion of indirect costs association.
6. This agreement will be required annually.

### REFERENCES:

- Account Management Responsibility: [http://www.csusm.edu/policies/active/documents/account\\_management\\_responsibility.html](http://www.csusm.edu/policies/active/documents/account_management_responsibility.html)  
Trust/Special Project Guidelines: <http://www.csusm.edu/budgetoffice/trusts.html>  
Trust Fund Administration Procedures: [http://www.csusm.edu/policies/active/documents/trust\\_fund\\_administration.html](http://www.csusm.edu/policies/active/documents/trust_fund_administration.html)

### ATTACHMENTS:

- 1) Trust/Special Project Budget Plan (REQUIRED)
- 2) Trust/Special Project Cash Flow Worksheet  
for cyclical projects only

### DOCUMENT DISTRIBUTION:

- 1) Account Manager
- 2) Dean/AVP/Administrator
- 3) Provost or Vice President
- 4) Trust Fund Accountant, Accounting Services
- 5) University Controller, Fiscal Services
- 6) Original document will be maintained by Accounting Services  
Account manager must retain a copy of the unsigned document.  
Copy of signed document available by request.
- 7) Original document will be maintained by Accounting Services

EXPECTED SOURCES OF TRUST REVENUE: Trust revenue is limited by California Education Code § 89721 to the following:

- (a) gifts, bequests, donations, etc (Note: these type of funds will be deposited to the Foundation and may be transferred to Trust)
- (b) student scholarship and loan programs
- (f) misc receipts/deposits (note: must be explained and are subject to fiscal approval)
- (g) fees and charges for optional services, materials, or facilities
- (h) fees and other revenues from instructionally related activities

### ADDITIONAL AUTHORIZED SIGNERS FOR DISBURSEMENT:

By signing below, I confirm that any expenditure activity authorized under this designation will conform to California State University, San Marcos and CSU Trustee policy, specifically the Trust /Special Project Agreement, and sound fiscal and budgetary practices. By signing this form, I understand that this expenditure authorization may be rescinded at any time, without notice, at the discretion of management.

NAME/TITLE	SIGNATURE/DATE
4.	/s/
5.	/s/
6.	/s/
7.	/s/
8.	/s/