

Humboldt State University
Office of University Advancement

Notification of Funds That Accept Charitable Donations

*Please complete and forward to Advancement Services Manager (ext. 5142),
SH 215 or FAX to x5148*

Fund Name: _____

Fund Account Number: _____

Fund is: New
 Re-activated
 Name Change (Previous Name: _____)
 Closed (Date Closed: _____)

Fund owned by:

- Alumni Association
- Associated Students
- HSU
- HSU Advancement Foundation
- HSU Sponsored Programs Foundation
- University Center

Fund Manager/Director: _____

Describe the purpose of the fund: (new Scholarship, Endowment or Club)

Date: _____ Initials: _____

For Office of University Advancement use only

Date received: _____ *Initials:* _____

Date entered in RE: _____ *Initials:* _____

Date scanned: _____ *Initials:* _____