



Disbursement Authorization

Please Note: Regular distributions from endowed accounts that have elected automatic distributions are transferred to appropriate UNT spending accounts on a quarterly basis. All other requests for disbursements from Foundation accounts must be accompanied by this form, which includes the account holder's original signature and verification statement.

TO: UNT Foundation, Ste 149 Gateway Center

FROM (Account Holder): _____ Amount: \$ _____

Account Name: _____ Number: _____

☞☞☞ Please select ONE of the following ☞☞☞

This is a Scholarship Award

Student's Name: _____ SSN: _____

Check to UNT Account # _____ (Scholarship Awards are NOT made directly to Students)

This is a Transfer

TO UNT or Foundation Account # _____ Reason for Transfer:

Pay the Attached Invoice(s) to:

(Vendor Name): _____

*** Please attach receipts, invoices, statements, etc., as documentation ***

I hereby certify that this disbursement conforms to the criteria described in the Memorandum of Understanding, or other guiding documents, for this fund.

Signature of Account Holder _____ Department _____

Phone Number: _____ Today's Date _____

Send me a confirmation that this transaction has been completed? YES!
The E-mail address to use is _____ CC E-mail _____

Completed on _____ By _____