

**MORROW COUNTY**  
**REQUEST FOR NEW FUND, DEPARTMENT and/or ACCOUNT NUMBERS**

**Date:**

**From:**

**To: Morrow County Auditor's Office**

**We formally request the Morrow County Auditor's Office to create new Accounts for the following reasons.**

1. We received additional Revenue Monies from \_\_\_\_\_  
to be used for the following purpose. Use additional sheet if necessary. MUST attach award/notice letter.

2. The additional money is                      Federal Grant Money                      State Grant Money                      Is Not Grant Money

3. We need a new fund YES                      NO                      Department YES                      NO

**Please create the new accounts into the following:**

Current fund and Dept. ( If applicable)	Name/Type of Account Needed	Revenue Expense	Amt to Certify in account
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use of new account # \_\_\_\_\_

Current fund and Dept. ( If applicable)	Name/Type of Account Needed	Revenue Expense	Amt to Certify in account
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use of new account # \_\_\_\_\_

Current fund and Dept. ( If applicable)	Name/Type of Account Needed	Revenue Expense	Amt to Certify in account
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use of new account # \_\_\_\_\_

Current fund and Dept. ( If applicable)	Name/Type of Account Needed	Revenue Expense	Amt to Certify in account
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use of new account # \_\_\_\_\_

Signature or Name of Authority Requesting