

Request for Renewal/Replacement Plant Fund Establishment

(For Non-Capital Improvements/Renovations to Plant Assets
that cannot feasibly be expended from the E&G Fund in a single fiscal year)

Requested Fund Name: _____(limit 30 characters)

Responsible Department: _____

Department Head: _____

Contact Name: _____

Contact e-mail Address: _____

Responsible Vice President: _____

Default Org Code/Org _____

Responsible Unit: ___MSU ___MAFES ___MSUES

 ___CVM ___FWRC

Describe in detail the purpose of this fund:

Identify sources of expected revenue and the anticipated date(s) of receipt:

Approved: Department Head _____ Date: _____

Approved: Dean/Director _____ Date: _____

Approved: Vice President _____ Date: _____

RPA Use Only:
___ Entered on Fund Table
___ Entered on VP Table



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