



REQUEST FOR CHECKING ACCOUNT
UTAH STATE UNIVERSITY
COOPERATIVE EXTENSION 4-H PROGRAMS

Name of County: _____

Requested Title of Club Account: _____

(Club Account should have county and 4-H in the name. Example: Cache County 4-H Wranglers)

Contact Information *(Responsible person must be a registered 4-H volunteer with their County):*

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Full Names with middle initial of two the individuals on signature card of account:

(Must be registered 4-H volunteers with their county)

1) _____ Date of Birth _____

2) _____ Date of Birth _____

Address for mailing bank statements

(USU will email a copy of the bank statement to the responsible person listed above)

Utah State University
Attn: Treasury Services
2400 Old Main Hill
Logan, UT 84322-2400

Required Signatures:

Vice President for and Finance

_____ Date

David T. Cowley

Controller

_____ Date

Dan Christensen

Manager of Treasury Services

_____ Date

Shanell Johnson

County 4-H Representative

_____ Date

County 4-H Representative

The above signatures indicate that the 4-H Club is authorized to use Utah State University's TIN.

Utah State University's Federal ID# (TIN) 87-6000528

