

REQUEST FOR A NAME CHANGE TO AN EXISTING AURORA FUND OR ORGANIZATION

Use Part A to request a name change to an existing Fund.
Use Part B to request a name change to an existing Org.

GENERAL INFORMATION

Your Name: _____
Organization: _____
Email: _____
Phone #: _____ Date: _____

PART A

FUND: Identifies a self-balancing set of accounts. Also identifies the Source of Funds

Suggested New Fund Name
(35 Chars max): _____
Current Fund Name: _____
Fund Number (required): _____

PART B

ORGANIZATION (Org): Identifies WHO spent the money. Usually the faculty or unit of budget responsibility and/or departments within an institution.

Suggested New Org Name
(35 Chars max): _____
Current Org Name: _____
Org Number (required): _____

FINANCIAL SERVICES USE ONLY

APPROVED BY: _____ DATE: _____
SIGNATURE: _____

**Please submit form to: Financial Analysis & Reporting, Room 412 Administration Bldg.
Email: FAR@umanitoba.ca Fax: 474-7925**