Letter of Guarantee Form

It is recognized that occasionally there may be circumstances, which might justify a temporary over-expenditure. Interim financing may be provided in situations deemed appropriate by the Department or Faculty.

The Unit Head must complete this form to authorize a temporary over-expenditure of a fund by providing interim financing from another funding source. Final acceptance of a Guarantee rests with Financial Services.

Please complete all sections below and return to the Fund Administrator, 3465 Durocher.

Fund with current or anticipated Over-Expenditure

Fund Code: _____ Fund Title: _____

Name of Fund Financial Manager: _____

Affiliated Department: _____

Expected funding amount: $_____ Expected date of funding: _____

Interim Financing provided by:

Guarantor Fund Code: _____ Fund Title: _____
(funding source to be used as collateral)

Amount of Guarantee: $ _____

Guarantee Expiration Date: _____
(cannot exceed the current university fiscal year)

Unit Head Authorization

Name (please print): _____ Title: _____

Unit (Faculty/Dept): _____

I authorize a temporary over-expenditure on the above named fund. In addition, I consent to the use of the above named Guarantor Fund to be used as collateral as the funding source to cover the over-expenditure under the University approved guidelines.

Signature: _____ Date: _____

Financial Services Authorization:

Fund Administrator: _____ Date: _____

Authorized By: _____ Date: _____