Trust Fund Account Set Up Information

PURPOSE

The purpose of this document is to facilitate the set-up of a new Trust Fund (TF) account. It sets forth the required documents and the steps needed to establish a new TF account in the Financial Management Modernization Initiative (FMMI) Automated Trust Fund (ATF) system.

REQUIRED DOCUMENTS

- Signed TF agreement
- APHIS Cost Management System (ACMS) screen print
- Completed New TF Account Information sheet (Page 2)

STEPS

1. Email FFIS Codes to establish desired FMMI accounting elements: WBS element, Fund, Fund/Cost Center, Functional Area, and Short Hand Code
2. Complete the New TF Account Information sheet
3. Email the Minneapolis TF Team the three required documents (email address below)
4. Once the new TF account has been established, the TF Manager(s) will begin receiving monthly TF statements via email

DEPOSITS

For specific instructions on how to make a deposit, visit: http://www.aphis.usda.gov/mrpbs/fmd/downloads/TF_Deposit_Information.pdf

CONTACT US: If you are part of United States Department of Agriculture (USDA), Animal and Plant Health Inspection Service (APHIS) direct questions to:

Trust Fund Lead, Lora Swanson: 612-336-3392
Or email: MPLS.TF.TEAM@aphis.usda.gov
New Trust Fund Account Information

The information provided below is used to establish the TF account in the FMMI ATF System

TF Account/Cooperator Name: ___________________________________________________________

WBS Element: _______________________________________________________________________

Cooperator US Tax ID #: _______________________________________________________________

TF Agreement #: ______________________________________________________________________

Effective Dates: _______________________________ to _____________________________________

Account Type: ___________________________ (i.e. Preclearance, Ralstonia, Quarantine, etc.)

Commodity Type: ___________________________ (i.e. Produce, Plants, Birds, etc.)

TF Activity Country Code: ___________________________ (Country TF activity takes place)

Primary TF Name Manager: _____________________________________________________________

Primary TF Manager Mailing Address: _____________________________________________________

Primary TF Manager Email Address: ______________________________________________________

Primary TF Manager Phone Number: _____________________________________________________

OPTIONAL CONTACTS (up to four additional contacts to receive and review TF statement)

TF Contact 2 Name and Email Address: ___________________________________________________

TF Contact 3 Name and Email Address: ___________________________________________________

TF Contact 4 Name and Email Address: ___________________________________________________

TF Contact 5 Name and Email Address: _________________________________________________