


FSA Debit Plan

DOCUMENT INFORMATION

Document Title	FSA Debit Plan															
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Office/Unit	Faculty Student Association															
Document Owner																
Contact Information	<table border="1"> <thead> <tr> <th>Office</th> <th>Name</th> <th>Phone</th> <th>Email</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office	Name	Phone	Email								
Office	Name	Phone	Email													
Approval Date																
Approved by																
Effective Date																
Review Date /Schedule																
Revision History																

DOCUMENT CONTENT

 2017-18 Debit Plan.pdf	
FAQ's	
Keywords	

Category(s)	<table border="1"><tr><td data-bbox="324 128 576 409"><input type="checkbox"/> Academic Affairs <input type="checkbox"/> Advancement <input type="checkbox"/> Financial <input type="checkbox"/> Governance <input type="checkbox"/> ITS</td><td data-bbox="576 128 820 409"><input checked="" type="checkbox"/> Operational <input type="checkbox"/> Personnel <input type="checkbox"/> School/College <input checked="" type="checkbox"/> Student Life</td></tr></table>	<input type="checkbox"/> Academic Affairs <input type="checkbox"/> Advancement <input type="checkbox"/> Financial <input type="checkbox"/> Governance <input type="checkbox"/> ITS	<input checked="" type="checkbox"/> Operational <input type="checkbox"/> Personnel <input type="checkbox"/> School/College <input checked="" type="checkbox"/> Student Life
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Sub-Category(s)			