CLUB FUNDING REQUEST FORM

Please complete the information and the following procedures:

- ☑ Only ***official*** receipts will be accepted that contain the name of the store, the date of the purchase, what was purchased and the amount paid
- ☑ If you have multiple receipts, # the receipts and indicate the receipt # you have given each one in the appropriate column
- ☑ Complete the rest of the chart with the appropriate information
- ☑ Once form is completed and signatures are obtained, it will be reviewed for approval
- ☑ Reimbursements will only be made if the form is complete and original receipts are attached.
- ☑ Reimbursement cheques will only be made in the name of the current club president

Club Name: _____ Acronym: _____

Semester: ❑ Fall ❑ Winter ❑ Summer

Club President: _____ _____
Signature Please Print Name

Phone: (__ __ __) __ __ __ - __ __ __ __ Cell: (__ __ __) __ __ __ - __ __ __ __

Email: _____@_____

Student #: __ __ __ __ __ __ __ __ __ Date: _____

Date	Description	Receipt #	Amount
	TOTAL		

REQUIRED SIGNATURES:

_____ _____
Club Treasurer Club Vice-President

OFFICE USE ONLY

Request Received By: _____ Date: _____

Approved ❑ Yes ❑ No

_____
Activities & Special Events Coordinator