

CLUB FUNDING/REIMBURSEMENT REQUEST FORM

Event Name:			Event Date:									
event Location:			E	event Time:								
Club Name:				Semester: F	□w □s							
Club Position:												
Signature:			(required)									
	()		•	, -								
Email:												
	Please complete the information and the Fill out information above to requ		event or meeting.									
			club ' section, with the <u>exception</u> of the 'Receipt #'.									
	 □ Email FUNDING/REIMBURSEMENT REQUEST to Club Liaison or Event & Club Coordinator □ Once form is completed and signatures are obtained, it will be reviewed for approval. Please allow for 3 business 											
 days for approval. Club will be emailed if the event has been approved or denied. □ Once funding has been approved, receipts must be submitted with copy of this form. □ Only ORIGINAL receipts will be accepted. No exceptions. □ If you have multiple receipts, # the receipts and indicate the receipt # in the appropriate column. □ Reimbursements will only be made if the form is complete, has been pre-approved and original receipts has been submitted. 												
							☐ Please allow up to 2 weeks for rein	mbursements to be p	processed.			
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							*This side to be filled in by the club			*This side is for administrative use only		
						Description Please include all relevant details- ie. company names. Any quotes should also be submitted with budget.		Amount Requested (Required for pre- approval)	Receipt # (Required once pre- approved)	Amount Approved	Amount Reimbursed	
	TOTAL											
Please he adm	ised that only pre-approved amounts will be re	rimhursed Anuthino not	annroved will not be	reimhursed Cluhs zoil.	I not he reimhursed for							
Trease of march		ry spend above and beyon			ee remeureeu jer							
			,									
Subm	nitted by:											
	Name		Date:	/	/							
	Position		. Date.	/	<u>/</u>							
	pproved											
☐ Denied by: Name Position			Date:/									