

Student Expenditure Approval Form

This form must be **COMPLETED** and **APPROVED** **THREE WEEKS PRIOR** to any purchases.

Section A: To Be Completed By Student

Event Information

Requestor: _____ Group/Organization: _____
Event: _____ Date, Time & Place of Event: _____
Purpose of Event: _____

Date of Request: _____ Signature of Group Approving Officer: _____
(Chair/President or Treasurer)

****Note: Please attach event agenda/itinerary.**

Item(s) requested: _____

Date Needed: _____ Cost Estimate: _____ Vendor Name: _____

Vendor Address: _____

Attach receipt(s) and return to the Office of Student Affairs **WITHIN 2 WEEKS** after purchase or event.

A LIST OF ATTENDEES MUST BE ATTACHED FOR ALL MEETINGS/EVENTS WHERE FOOD IS SERVED.

Section B: For Office of Student Affairs Use Only

Approval: _____ Date: _____ BP: _____

Purchase Order Needed? Yes _____ No _____ If yes, PO#: _____
(Note: PO form(s) can only be completed on Springfield Campus)

New Vendor? Yes _____ No _____ If yes, W-9 with original signature required

Payment type: P-Card: _____ IDF: _____

Name of p-card holder: _____

If Reimbursement - Name: _____

Dawgtag #: _____

Address: _____

_____ Entertainment Expense Form

_____ Alcohol Approval Form

PLEASE SIGN IN

EVENT:			
DATE:		TIME:	
LOCATION:			

****FOR FOOD EVENTS A SIGN IN SHEET MUST BE SUBMITTED WITH REIMBURSEMENT PAPER WORK**

1		26		51	
2		27		52	
3		28		53	
4		29		54	
5		30		55	
6		31		56	
7		32		57	
8		33		58	
9		34		59	
10		35		60	
11		36		61	
12		37		62	
13		38		63	
14		39		64	
15		40		65	
16		41		66	
17		42		67	
18		43		68	
19		44		69	
20		45		70	
21		46		71	
22		47		72	
23		48		73	
24		49		74	
25		50		75	