

University Residences & Dining Services Funding Request 2012-2013

Use this form to request funds and document spending for:
Hall Councils, Floor Funds, BSA & RHAC

You must get approval to use funds **PRIOR** to purchase.

BOOKKEEPING & CODING INFORMATION

Before Project

- Fill out Project Description, Funding Request and **Part 1** (on page 2 of this form).
- Submit to the appropriate organization for funding approval.
- If you will use LC funds or University funds, you must use the appropriate forms and get appropriate signatures.

After Project

- On page 2, Complete **Part 2** and **Part 3**
- Attach required receipts (no receipts, no money) and turn in within 7 days of your project.
- When receiving reimbursement from the university, please fill out appropriate forms.

PROJECT DESCRIPTION (The Details of Who, What, Why, When & Where)

Project Name:	Today's Date:
Project Planner(s):	Project Date: Project Time:
Address: City State: Zip:	Location:
Phone:	Target Audience:
Email:	Anticipated Attendance:
Organization/Floor #:	
Description of the Project: What are you doing? Include presenter information (first and last name, title, department, email) if applicable:	
What student needs are being addressed by this project?	

FUNDING REQUEST	Funds requested from (Org/Account)	Amount Requested
		\$

To Be Completed by Approval Agent

Date		Amount Approved:	\$
Signature of Approval Agent		Funding Source/Account	

URDS Funding Request 2012-2013 – page 2

Complete before you request funding!			Complete after project. Be sure to attach all receipts.		
FUNDING	Budgeted		Actual		
	Organizations & Funds	Amount Requested	Amount Received		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
	Total Funding:	\$	\$		
PURCHASES	Planned Purchases		Actual Cost		
		Anticipated Cost	Actual Cost		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
	Total Costs:	\$	\$		

Attach All Receipts Here

Staple receipts to top of this page, leaving margin for hole-punching to the right →

EXPENSES SHOULD NOT EXCEED APPROVED FUNDING!!!

REIMBURSEMENT INFORMATION

Make check payable to:	Reimbursement Amount	↓ TREASURER ONLY ↓	Check Number	Date	Amount	Fund(s)
Address of Payee:	\$					
Phone number of Payee:			Signature of Check Recipient			
Make check payable to:	Reimbursement Amount	↓ TREASURER ONLY ↓	Check Number	Date	Amount	Fund(s)
Address of Payee:	\$					
Phone number of Payee:			Signature of Check Recipient			

REIMBURSEMENT INFORMATION ADDITIONAL SHEET

Make check payable to:	Reimbursement Amount	⇓ TREASURER ONLY ⇓	Check Number	Date	Amount	Fund(s)	
Address of Payee:	\$						
Phone number of Payee:			Signature of Check Recipient				Date picked-up
Make check payable to:	Reimbursement Amount	⇓ TREASURER ONLY ⇓	Check Number	Date	Amount	Fund(s)	
Address of Payee:	\$						
Phone number of Payee:			Signature of Check Recipient				Date picked-up
Make check payable to:	Reimbursement Amount	⇓ TREASURER ONLY ⇓	Check Number	Date	Amount	Fund(s)	
Address of Payee:	\$						
Phone number of Payee:			Signature of Check Recipient				Date picked-up
Make check payable to:	Reimbursement Amount	⇓ TREASURER ONLY ⇓	Check Number	Date	Amount	Fund(s)	
Address of Payee:	\$						
Phone number of Payee:			Signature of Check Recipient				Date picked-up