



CLUB EXPENSE FORM

COMMUNITY RELATIONS AUTHORIZATION FORM

Sponsored Activity Grant Club Booster Grant New Club Grant Club Sport Grant Club Expense

BUDGET & ACCOUNT INFORMATION

Club Name: _____

Event Name: _____ Event Date: _____

Account #: _____ Account Balance: _____

Invoice Date: _____ Invoice Number: _____

Date Received ASI Office

PAYEE INFORMATION

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Pick up at Auxiliary Office

Date Received Auxiliary Office

PURCHASE ORDER? Yes No Shipping Address: _____

DESCRIPTION OF EXPENSE

_____ \$ _____
_____ \$ _____
_____ \$ _____

Sponsored Activity Grant and Club Sport Grant Only: Speakers (9542) Entertainment (9546) Supplies (9547)
 Rental/Tech (9548) Misc (9553) Publicity (9558)

TOTAL COST \$ _____

JUSTIFICATION (Attach a list of attendees, if applicable)

Place (Information about Event, including date & time): _____

Purpose (In relation to Club's mission): _____

Relationship (Name/title/relative to University): _____

SIGNATURES & APPROVALS

VERIFIED BY ASI Business Office: _____ Date Processed: _____

AUTHORIZED BY

Club Officer: (Print) _____ (Signature) _____

Club Advisor: (Print) _____ (Signature) _____

Internal Use (Applicable to Grant forms only)

ASI VP of Finance: _____ ASI Executive Officer: _____

PROCESSED BY _____ Date Processed: _____
Accountant (Signature) _____