



STUDENT ACTIVITIES PAYMENT REQUEST FORM

CLUB NAME:

CLUB OFFICER:

REQUESTED BY:

PHONE NUMBER:

W-9:

YES

NO

VENDOR AND ITEM DESCRIPTION	AMOUNT
PLEASE ATTACH ALL SCANNED RECEIPTS AND INVOICES IN THE SAME EMAIL.	TOTAL:

TYPICAL PAYMENT TIME IS 2-3 WEEKS. PLEASE ALLOW EXTRA TIME FOR PAYMENT DURING THIS TIME.

FY	FUND	ACCOUNT	AMOUNT

SIGNATURES INDICATE THAT THE ABOVE REFERENCED COMMODITIES AND/OR SERVICES, HAVE BEEN COMPLETELY RECEIVED; ARE SUBMITTED FOR PAYMENT AND ARE VALID CLAIMS AGAINST THE STUDENT ACTIVITY FUND, AND THAT ADEQUATE FUNDS ARE AVAILABLE.

CLUB ADVISOR SIGNATURE

DATE

STUDENT ACTIVITIES DIRECTOR SIGNATURE

DATE