Student Organization Request Form

Student Organization: _____ Account #: _____

☐ EAF-Travel ☐ EAF - No Food ☐ SAF - Food Allowed

Requestor: _____ Requestor Phone #: _____

Advisor Name: _____ Advisor Phone # : _____

Advisor Signature: _____

Student Organization: Provide Student Organization Request Form to SOuRCe Liaison for processing after completion

Check One	Method to Purchase
	Doc-U-Zip *(copies printed at Doc-U-Zip)* *Forward completed Request Form along with Doc-U-Zip receipt to SOuRCe Liaison for processing*
	Pre Paid Check *(external providers; subscription & registration fees)* *Forward completed Request Form and vendor estimate to SOuRCe Liaison for processing*
	Purchase Order *(external providers; attach copy of quote/contracts)* *Forward completed Request Form and vendor quote/contract to SOuRCe Liaison for processing*
	Web Requisition *(University provider; Student Reimbursement, gas card, department transfer)* *Forward completed Request Form to SOuRCe Liaison for processing*
	University Dining Services *(SAF only)* *Forward completed Request Form and UDS event sheet to SOuRCe Liaison for processing*
	Honorarium *(Payment for one-time independent contractor)* *Forward completed Request Form and Honorarium Form to SOuRCe Liaison for processing*

Use for Reimbursement

Make Check Payable to: _____

Student ID #: _____
(Only if check is for individual)

Address: _____
(Street)

_____
(City) *(State)* *(Zip)*

VISA PURCHASE

VISA	**External - Off Campus Purchases; pre-approved travel expenses** *Prepare Student Organization Request Form. Obtain VISA Card from SOuRCe Liaison. Return original receipts, VISA card & Student Organization Request Form to SOuRCe Liaison upon completion of purchase.*	**VISA Card Check-Out:**		**VISA Card Check-In:**	
		ID Provided		**Original Receipts**	
		Date Out		**Form attached**	
		Checked out By:		**Date Returned**	
				Checked In By:	

Vendor Information

Vendor Name:	
Contact Name/Phone #:	
Address:	
City/State/Zip:	

Product Information

Quantity	Item Description	Unit Price	Total Price
	TOTAL		

SOuRCe Liaison Use Only

SOuRCe Liaison: _____ ☐ Funds Available in Acct. Amount in Acct. $ _____ ☐ Original receipts attached Date: _____

SOuRCe Liaison: Forward to Business Office - Student Union for processing after review

Business Office Use Only

TOTAL PURCHASE: $ _____

_____ Posted to Budget: _____ (initial)

_____ Posted to Paymentnet: _____ (initial)

Split: _____ account_____ _____ (initial)

_____ account_____ _____ (initial)

	Supplies/Services		Communications
	5789 Advertising		6311 Postage
	5710 Artist Fees		
	5794 Awards - Non Fin Aid		**Travel Hospitality**
	5787 Dues & Memberships		7041 Hospitality (food)
	5805 Freight & Express		7101 Purchase-Resale (Food)
	5817 Giveaways (trinkets)		7000 Travel - lodging, food, transp.
	5759 Maintenance Supplies		7040 Travel - Non-Employee
	5757 Office Supplies		**Miscellaneous**
	5763 Other Supplies		OTHER
	5769 Rental of Equipment		
	5788 Subscription, Books		
	5803 Training & Prof Educ		