

CEDAR CREST COLLEGE
Student Government Association

STUDENT ACTIVITIES BUDGET REQUEST FORM

ORGANIZATION NAME: _____

ORGANIZATION ACCOUNT NUMBER: _____

Please return this form to the Student Government Campus Mailbox O by Friday, September 5, 2008 at 4:00 PM. Requests will only be accepted through the Campus Mail system. If no request is returned, Student Government is not obligated to allot funding. Please be as detailed as possible by itemizing each part of each event, using additional pages as necessary. Please feel free to email the Student Government Treasurer, Caitlin Billow, at studgov@cedarcrest.edu with any questions or concerns.

DESCRIPTION

AMOUNT REQUESTED

Event 1: _____

Total: _____

Speakers and Film _____

Food Services _____

Duplicating _____

Traditions/Activities _____

Miscellaneous _____

Event 2: _____

Total: _____

Speakers and Film _____

Food Services _____

Duplicating _____

Traditions/Activities _____

Miscellaneous _____

Event 3: _____

Total: _____

Speakers and Film _____

Food Services _____

Duplicating _____

Traditions/Activities _____

Miscellaneous _____

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| | |
|-----------------------------|--------------|
| Miscellaneous: _____ | Total: _____ |
| Speakers and Film _____ | _____ |
| Food Services _____ | _____ |
| Duplicating _____ | _____ |
| Traditions/Activities _____ | _____ |
| Miscellaneous _____ | _____ |

TOTAL AMOUNT REQUESTED: _____
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| | | |
|--------------------------|------------------------------|--------------|
| Treasurer's Name (Print) | Treasurer's Name (Signature) | Phone Number |
| President's Name (Print) | President's Name (Signature) | Phone Number |
| Advisor's Name (Print) | Advisor's Name (Signature) | Phone Number |

Note: Please provide a phone number where you can actually be reached on a weekend in case the Finance Committee has a question to ask you regarding details about an event during the Budget meeting.