



REQUEST TO SPEND FUNDS (S0 & ST FUNDS)

FORM MUST BE SUBMITTED AT LEAST ONE WEEK PRIOR TO DATE OF EVENT OR ORDER

READ FIRST BEFORE YOU COMPLETE THE FORM

- (1) Do **NOT** order or make any purchases without obtaining prior approval through this form. Any person purchasing or obligating the college to such a purchase without prior written approval from Student Life will be personally responsible for the financial obligation or return of goods.
- (2) For Travel-Related Requests, please complete the Travel Authorization and Student Travel Request Forms.
- (3) For Fundraisers, please complete the Fundraising Request Form.
- (4) Please ensure you have the appropriate funds available to cover the requested expenses.
- (5) All ST funds must be spent in compliance with the Finance Code. If you are uncertain if a purchase can be made please contact the Student Life Office.
- (6) Wherever possible, an invoice, quote or support documentation should be included with the request. Clubs must also attach minutes that include the approval of purchases/expenses by club members.
- (7) Keep all ORIGINAL receipts. After making a purchase, submit the original receipts (must have advisor's signature and the appropriate budget code) to the Student Life Office.
- (8) This form must be submitted to:
 - Walla Walla Campus: Nadine Stecklein (Nadine.Stecklein@wwcc.edu) or Vince Ruzicka (Vince.Ruzicka@wwcc.edu)
 - Clarkston Campus: Paul Boyd (Paul.Boyd@wwcc.edu)



REQUEST TO SPEND FUNDS (S0 & ST FUNDS)

FORM MUST BE SUBMITTED AT LEAST ONE WEEK PRIOR TO DATE OF EVENT OR ORDER

Student Club Name: _____

Requestor Name: _____ Phone#: _____

Club President Club Treasurer Club Advisor Other:

EVENT/PURCHASE INFORMATION

Event Name/Purpose of Purchase: _____

Event Date(s)/Need Items By: _____

Event/Activity open to: Club Members Only All Students College Community General Public

We are planning to purchase (check all that apply):

Food Supplies Equipment Clothing/Swag Duplicating/Printing Other: _____

We are planning to purchase items from the following vendors (name of stores where purchases will be made). _____

We are requesting to spend (estimated dollar amount) \$ _____

We are requesting to spend funds from our S0 (non-state money) Account Number: 522-264-S0 _____

We are requesting to spend funds from our ST (state funds) Account Number: 522-264-ST _____

If approved, the purchase will be made through (check all that apply): College Credit Card (P-card)

Bookstore Purchase Check Request Personal Funds (then reimbursement) Purchase Requisition

****REQUIRED SIGNATURES****

Student Club Treasurer's Signature (Club President, in absence of Treasurer) Date _____

Advisor's Signature Date _____

SGA Treasurer's Signature (SGA President in absence of Treasurer)* Date _____

**ONLY required when spending ST funds*

STUDENT LIFE OFFICE USE ONLY

Approved Denied (reason): _____

Director of Student Life Date _____
Received: _____

Decision will be e-mailed to Club President, Club Treasurer and Advisor