These funds should come from  $\underline{Approved}$  SGA Grant Funds Select One:

These Funds should come from Fundraised funds



## **SOC Account Disbursement Request Form**

(Student Use Only - Faculty/Staff requests should be entered on the My MU Portal.)

| Request Type:                                             |                  |                    | Request Date:             |  |
|-----------------------------------------------------------|------------------|--------------------|---------------------------|--|
| Check Request (complete below)                            |                  |                    |                           |  |
| Corporate Credit Card Reque will need to make the request |                  | over, advisor      |                           |  |
| SOC Account Name:                                         |                  | SOC Project Code:  |                           |  |
| Vendor Name:                                              |                  |                    | Date Needed:              |  |
| Amount Requested: C                                       | ard Holder Name: |                    | Card Holder Phone Number: |  |
| Description of Purchase:                                  |                  |                    |                           |  |
| Business Purpose of Purchase:                             |                  |                    |                           |  |
| Complete for Check Reque                                  | sts Only:        |                    |                           |  |
| Check Payable to:                                         |                  | Mailing Address:   |                           |  |
|                                                           |                  |                    |                           |  |
| Date to Pay:                                              |                  | Accounts Payable U | se Only. Vendor#:         |  |
|                                                           |                  |                    |                           |  |

| Check to be picked-up Please mail check to address above                                                                                                                                                                                                                                                                                     |                   |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--|--|--|
| ***Student Organization checks are issued on Tuesdays & Thursdays after 3:00 pm. Requests must be in Procurement Services no later than noon the day prior to Tuesday or Thursday. Receipts must be turned in no later than ten (10) days after a check has been issued. Future requests will not be paid if prior receipts are outstanding. |                   |  |  |  |
| ***For purchases using the University Credit Card, all receipts must be returned with the card immediately after use. The card will be activated for use and blocked after use. Cards can be checked out through the Corporate Card Administrator, ext. 7349.                                                                                |                   |  |  |  |
| Club Officer Approval #1:                                                                                                                                                                                                                                                                                                                    | Advisor Approval: |  |  |  |
| Printed Name:                                                                                                                                                                                                                                                                                                                                | Printed Name:     |  |  |  |
| Club Officer Approval #2:                                                                                                                                                                                                                                                                                                                    | Dean Approval:    |  |  |  |
| Printed Name:                                                                                                                                                                                                                                                                                                                                | Printed Name:     |  |  |  |
|                                                                                                                                                                                                                                                                                                                                              |                   |  |  |  |

Revised 5/29/18

Check one: