

**HOFSTRA UNIVERSITY STUDENT GOVERNMENT ASSOCIATION
FUNDING REQUISITION**

Organization: _____ Date ___/___/___ Date Rec'd ___/___/___
By SGA Bookkeeper

Authorized Person: _____ Phone # of Requisitioner: _____

Email address: _____
(must be listed)

Detailed Explanation for Request: _____

Amount Requests: _____ Payment Required by: _____

Date of Event: _____ Location & Ticket Price _____

METHOD OF PAYMENT	
<input type="checkbox"/>	Purchase Request - for items over \$500.00, attach Purchase Request & Quote. If quote is over \$2,500.00, three bids must accompany request.
<input type="checkbox"/>	Check Request - attach request along with invoice or single engagement contract, guest lecturer or musical accompaniment contract.
<input type="checkbox"/>	Budget Transfer - attach Hofstra University Budget Transfer Form/Lackmann Food Services Invoice/Printing Department Request
<input type="checkbox"/>	American Express Card - return card with documentation regarding purchase

APPROVALS	
SGA Bookkeeper: _____ Pamela Orefice	Date _____
Comments: _____	Current Balance after this expense \$ _____

Student Activities Director: _____ Anita Ellis	Date _____
<input type="checkbox"/> Approved _____	<input type="checkbox"/> Denied _____

SGA Comptroller: _____	Signature _____	Date _____
<input type="checkbox"/> Approved _____		
<input type="checkbox"/> Denied _____		
<input type="checkbox"/> Modified _____		

Fines (if necessary) Warning _____
1 st Offense 20% of request _____
2 nd Offense 35% of request _____
3 rd Offense Budget Frozen until reviewed by IRC Committee _____

Comments: _____
10/21/08