



Student Life, Equity & Engagement
Student Government Assembly (SGA)
1501 Mendocino Avenue, Santa Rosa, CA 95401

SGA FUNDS REQUEST FORM

Please Staple Original Receipts, Invoice, and Meeting Minutes

Requested by:		Budget Line--Name:		SGA	SCF	SRF	
Advisor:		Funds Requested:		Fund Source:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Needed by:		Date of Meeting:		W-9 (New Vendor)			

Payable To:	
Name:	
Address:	
City, State, and Zip Code:	

Description	Total

SGA/SLC Meeting Minute #: _____	GRAND TOTAL:	_____
SGA Vice President of Finance: _____	Date:	_____
Mgr., Student Life/Engagement: _____	Date:	_____
Senior Dean of Students: _____	Date:	_____

***Advance Funds:** Officers can request advance funds with this form. Receipts representing expenses and any unused monies must be returned to the Advisor, Student Life Accounts & Special Programs within 5 instructional days of the cash advance. Should the recipient not comply, or return a portion of these receipts/monies within 5 days, total amount of the unaccounted funds shall be posted to the student's account with the college. Allow 14 days for processing advancement check.
***Reimbursements:** If using a personal credit/debit card, please provide copy of bank statement (acct. number blacked out) showing your name and the transaction. Alcohol purchases are not permitted and cannot be reimbursed.

Contact: Advisor, Student Life, Equity & Engagement
Email: clubaccounts@santarosa.edu | 707-524-1808

Date: _____
Check #: _____