



making things happen...

Student Activities / Student Senate Office
Siek Campus Center, Room 210
80 Vandenberg Avenue, Troy, New York 12180
(518) 629-7348 phone / (518) 629-7496 fax
(518) 629-HVCC / www.hvcc.edu

CHECK REQUEST

Club Org # : _____

All Check Requests must be submitted to the Student Activities Office before any disbursements can be made. All purchase orders must be approved by the Director or Assistant Director of Student Life.

Name: _____ Dept/Club: _____

Itemization: _____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Total Amount Requested: \$ _____

Purpose: _____

By signing this document I acknowledge receipt of funds for expenses pertaining to a Student Senate Sponsored Club or event and agree to return all receipts pertaining to all expenditures outlined above. Any Funds not used for the purpose stated above must be returned with all receipts to the Assistant for Financial Analysis to be allocated back to the proper account. I understand that Taxes will not be reimbursed to any vendor in New York State and that use of this organizations Tax Exempt form must be pre-approved.

Failure to comply with the above can result in loss of future Student Senate Funding.

Individual Making Request: _____ Date: _____

Approvals: _____ Date: _____
Director or Assistant Director of Student Life

(PLEASE SUBMIT ALL COPIES TO THE ASSISTANT FOR FINANCIAL ANALYSIS, CTR210)

Please do not write below this line:

Amount of Receipts: \$ _____ Cash Amount Returned: \$ _____

Total: \$ _____

Assistant for Financial Analysis: _____ Date: _____