

# ASSOCIATED STUDENT GOVERNMENT RESERVE FUND REQUEST FORM

## GENERAL INFORMATION

Name of Recognized Student Organization \_\_\_\_\_

Name of Contact \_\_\_\_\_ Daytime Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Short summary of event activities

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Signature of Contact \_\_\_\_\_ Date \_\_\_\_\_

## RESERVE FUND REQUEST FOR TRAVEL

Date(s) of Travel \_\_\_\_\_ Number of Members Participating \_\_\_\_\_

Destination \_\_\_\_\_

Type of Transportation:    Ground  
   Air                    How much per ticket (attach documentation of airfare quote)

Lodging:            Yes                    No                    If yes, Number of Nights \_\_\_\_\_

Registration:      Yes                    No                    If yes, How Much Per Person \_\_\_\_\_

## RESERVE FUND REQUEST FOR PRINTING & PUBLICITY

Date of Event \_\_\_\_\_ Estimated Expenditure \_\_\_\_\_

Name of Event \_\_\_\_\_

# RESERVE FUND REQUEST FOR SPEAKER HONORARIUM

Date of Presentation \_\_\_\_\_

Name of Speaker \_\_\_\_\_ Honorarium Amount \_\_\_\_\_

\*For the monies to be received by the organization, the Contact listed will be required to attend a Student Senate meeting to answer any questions regarding the Reserve Fund Request.

This form needs to be completed and returned to the ASG Fiscal Affairs Committee, Student Organizations & Activities office, Campus Box 4065, **at least six (6) weeks prior to the event** to make sure that any funds granted could be available by the time of the event. Should there be questions regarding this form, please contact the ASG Fiscal Affairs Committee at 341-5481.

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**OFFICE USE ONLY**

Date Received \_\_\_\_\_

Committee Vote: \_\_\_\_\_Affirmative \_\_\_\_\_Negative \_\_\_\_\_Abstain

Fiscal Affairs Chair Signature \_\_\_\_\_ Date \_\_\_\_\_