

# EXPENDITURE APPROVAL FORM (EAF)

## 1. GROUP

FULL NAME of Organization: \_\_\_\_\_

Preparer's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

## 2. EVENT

Name of Event/Project: \_\_\_\_\_

People in Attendance: \_\_\_\_\_ Event Date: \_\_\_\_\_

## 3. CHECK ONE OR MORE ACCOUNT

- Campus Recreation
- Gift
- Revenue
- RHA
- TRAILS Revenue
- TRAILS Departmental
- GW BAND Revenue
- GW BAND Departmental
- Other Fund \_\_\_\_\_

## 4. CHECK ONE OR MORE PAYMENT TYPE

- Petty Cash                      Amount \$ \_\_\_\_\_                      Date Needed: \_\_\_\_\_  
(Petty cash only)
- Credit Card
- Check to Vendor
- Reimbursement
- University Transfer
- Sodexo Catering                      Oracle: \_\_\_\_\_
- Marvin Center/Lisner
- Enterprise Car Rental
- Travel (specific form required - air, hotel)
- Other    Specify: \_\_\_\_\_

## 5. PAYMENT AMOUNT AND DESCRIPTION

AMOUNT	DESCRIPTION
\$ _____	_____
\$ _____	_____
\$ _____	_____
<b>TOTAL \$</b> _____	

## 6. NAME AND ADDRESS OF COMPANY/PERSON SEEKING PAYMENT/REIMBURSEMENT

VENDOR/NAME OF INDIVIDUAL TO REIMBURSE: \_\_\_\_\_

STREET: \_\_\_\_\_ APT/SUITE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_ GWID/SSN: \_\_\_\_\_

**\*ADDRESS MUST BE LISTED AS CURRENT ADDRESS IN BANNER FOR REIMBURSEMENTS\***

Original receipts are required with original proof of payment within 30 days. An individual may not approve his or her own reimbursement. All students must have direct deposit on file with the university. Please attach invoice for payment. Must include online shopping cart for online orders.

## 7. Signatures and Approval

Approval by Financial/Executive Officer \_\_\_\_\_

Date of Approval \_\_\_\_\_

Approval by Student Organization Advisor \_\_\_\_\_

Date of Approval \_\_\_\_\_

- Only the President and the Treasurer are authorized to approve expenditures; Individuals may not sign for their own reimbursements
- **Individual reimbursements MUST BE SUBMITTED within 30 days of expense (receipts WILL NOT be processed after 30 days of purchase)**
- Attach original receipts and documentation along with proof of payment for any reimbursement request (no staples)

**WHITE Copy** - Student Organization Advisor; **YELLOW Copy** - Center for Student Engagement; **PINK Copy** - President/Treasurer