

**CARLETON COLLEGE STUDENT ORGANIZATION
CHECK REQUEST**

Student Organization _____	DATE _____
Organization Account # _____	
PAY TO _____	US MAIL _____
ADDRESS _____	E-CHECK _____
_____	CAMPUS MAIL ADDRESS _____
_____	PICK UP NAME _____

Attach a completed W-9 form for a NEW vendor. W-9 forms are available from the Business Office Website or at irs.gov

EXPENSE CODE (see below)	DATE	DESCRIPTION OF EXPENSE	TOTAL \$ AMOUNT OF EXPENSE	TOTAL MILES

Special Instructions: Submit expense reports at least monthly.

Any expense request older than 60 days will be denied.

MUST use actual odometer readings or mapquest to calculate mileage (NO RECEIPTS).

TOTAL MILES _____
CURRENT MILEAGE RATE <u>0.14 (07/01/09)</u>
TOTAL MILEAGE CHARGE _____

TOTAL CHECK REQUEST

EXPENSE CODES:		
5301 Printing	5402 Equipment	5802 Student Travel/Conference Expenses
5302 Supplies	5757 Programs	5911 Entry fees/Memberships
5305 Postage	5907 Meal Reimbursement	5281 Honoraria/Professional Services
		5999 Other

ATTACH ORIGINAL RECEIPTS TO BACK.

I authorize the above payments and take full responsibility for assuring their accuracy and compliance with CSA financial policy.

APPROVED BY _____	PHONE _____
Student Organization President or Treasurer (please print)	

CSA TREASURER'S SIGNATURE _____	DATE _____
Required for all checks written to a Carleton Student and for all checks over \$500.	

SUPERVISOR'S SIGNATURE _____	DATE _____
Aaron Chaput (Club Sports only) Club Sports Cash Disbursement Authorized if Total < \$100 - Initial if Cash Rec'd 	