## **Professional School End of the Year Report**

Name of Student Organization:	
Name of Organization Representation	ve:
E-mail:	Representative Phone:
(all contact from CSU takes plac	e via e-mail)
Organization's Account Numbers:	Creighton Federal Credit Union: Creighton University Agency Account: Other Accounts:

Along with this form, please submit:

- An Outline of Exact Expenditures
- A Complete list of Organizations that Received Rebates and the amount that they received
- A Complete List of All Sources of Revenue (including, donations, fundraising, etc.)
- A Complete Roster of Current Members and their contact information

It is optional to submit the following:

- Justification for Exceptions to Any Funding Policies stated in *Funding Procedures* (Timelines, Eligibility, Non-Creighton Federal Credit Union Account, etc.)
- **Detailed Information** about your organization.

I have read and understand the funding policies and procedures (available at Student Activities Front Desk, <u>www.creighton.edu/csu</u> or from the CSU Vice-President for Finance) that Creighton Students Union follows. I am also aware of how the process works and <u>all the relevant deadlines</u>.

## (Signature of Representative)

(Signature of Moderator)

Please return this form and all of the <u>required components</u> to the Student Activities Office by the last Monday of April. This report will be submitted to Creighton University's Internal Audit Department as a component of Creighton Students Union's annual audit report.

## Office Use Only

Registered in Student Acti	vities:		
Due Date:		Date Submitted:	
Additional Information:			
VP for Finance:		Date	e:
President:		Date	e: