Florida Southern College Student Government Association Organizational Budget Funds Request Proposal Form

Organization:	
President:	Contact Number:
President's Signature:	Date:
Advisor:	Contact Number:
Advisor's Signature:	Date:
Purpose of Organization:	
Anticipated Total Cost of Organization	Event:
Amount Requested:	
Describe the planned use of funds: [Plea	ase provide a specific budget breakdown and attach additional
documentation (i.e. price quotes) as needed]	
Wiles	
	ar, and how will the funds requested be used to benefit the
student body?	
Does your organization have any additi	ional funding? [Dues, fundraising, etc.]. If so, please describe:
2000 your organization have any accura	one remained to the second of
Date of event:	
Number of People in Organization:	
This form must be stamped and initial	ed by the Office of Student Activities Secretary and
placed in the mailbox of the V.P. of Fi	inance.
For Office Use Only:	
	ee Mailbox (with initials):
Date voted on:	
Amount Allocated:	
Restrictions:	
V.P. Finance Signature:	