Student Organization Expense Report

Requisition Number _____

Check one: ☐ Reimbursement Request
☐ Reconciliation of Advance

Name _____

Club _____

Orig. Check #/Requisition # for Advance _____
Circle one: Ck# or Req#

Date	Items Purchased	Purpose	Vendor	Amount
			Total Expenditure:	
			Amount of Advance:	
			Balance Due / (Returned funds):	

Account # _____

REQUESTOR CERTIFICATION: I certify that the amounts listed above are my true expenses, that they have not and will not be reimbursed by another entity, and that they are in accordance with the current Faulkner University Expense Policies and Procedures.

Note:
(1) Attach receipts for each expenditure
(2) For advance funds returned:
(A) Obtain Business Office Receipt
(B) Attach copy of receipt

Requestor's Signature _____ Date

Club Sponsor's Signature _____ Date

Assistant Dean of Student's Signature _____ Date