

AS/TPB TEAM ONLY



ASSOCIATED
STUDENTS
UNIVERSITY OF SAN DIEGO

Request for Distribution of Funds

Attach all ORIGINAL RECEIPTS and CONTRACTS

Requesting Party: _____	Date: _____
AS/TPB Position: _____	
Phone Number: _____	
Email: _____	

Payable To: _____	Amount: \$ _____
Tax ID/ SSN/Student ID#: _____	* Do not leave blank
Address: _____	

E-mail: _____	
Phone Number: _____	

Event Info (Mandatory For All Reimbursements)	
Title of Event: _____	
Number of Attendees: _____	
Items Purchased: _____	

Justification of Purchase: _____	

<input type="checkbox"/> Hold at Accounts Payable (only to be used for performance contracts)	

Source of Funds: (FILL OUT COMPLETELY)					
	Project	AS/TPB Position	Task Number	Event Name	Amount
eg:	ASST00025	Multicultural	01	March of Toreros	\$2,000

Check needed by (NO ASAP): _____ Check (over \$100) _____ OR
Cash (under \$100) _____

FOR QUESTIONS OR CONCERNS PLEASE CONTACT THE FINANCE CHAIR
ASFINANCE@SANDIEGO.EDU