2012-2013 Student Association Senate Appropriation Request Form

| Organization | | |
|---|--|--|
| | (Please write out complete r | name) |
| President | Phone # | Email |
| Treasurer | Phone # | Email |
| Advisor | Phone # | Email |
| Do you have a Banner Account YES N | O If YES Banner Account | # |
| If no please complete the following so we may | mail the appropriation: | |
| Name | MSU ID Number | <u></u> |
| Address | | |
| | ch item listed, the number of ards that will be sponsored by railable funds. The senate ca | annot appropriate money to student |
| details the process by which fund www.sa.msstate.edu. Those organizations receiving fun progress reports, along with all rec If your organization received funds semester. Your organization's information m website. If you need assistance widlf100@saffairs.msstate.edu or (66) | ds are appropriated. The conds from the Student Associate eipts of the used funds after a last appropriations cycle, at must be up to date in order to the this, contact Daniel Fisher (52) 325-2930. request is February 20, 201 | the Appropriations on the Difference of One in the Center for Student Activities at 13 at 5:00 p.m. & must be turned in to the SA website. |
| We hereby do testify to the truth and accuracy | of the budgets for both the organ | nization and the program/project sponsored. |
| | , Presiden | t Date |
| | , Treasure | r Date |

______, Advisor

2011-2012 Student Association Senate Accountability Form

| Organization: | | |
|--|--|------------|
| Faculty Advisor: | Treasurer: | |
| President: | Phone Number: | |
| | ific account of how funds were used, how many students were afled to MSU, and any awards that were sponsored by the funds. | ffected by |
| Also, please submit receipts verifying the | use of funds. | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| standards will result in the revocation of a | Yednesday, February 20, 2013 by 5:00 PM . Failure to comply wall SA funds and a one (1) year suspension from future SA fundi Shepherd at (256) 318-0666 or treasurer@sa.msstate.edu | |
| We hereby testify to the truth and accurac | cy of the budgets for both the organization and the event sponsor | ed. |
| Organization President | Date: | |
| Organization Treasurer | Date: | |
| Faculty Advisor | Date: | |