



**CAPE BRETON UNIVERSITY
STUDENTS' UNION**

FUNDS REQUEST FORM

Society Name: _____

Current Date: _____

Date Cheque Required: _____

****Note: The Students' Union requires a minimum 3 business days notice for all cheques****

PURPOSE: _____

CHEQUE PAYABLE TO: _____

Amount Requested: _____

SOCIETY SIGNING OFFICERS

Name (*please print*)

Name (*please print*)

Signature

Signature

Position

Position

FACULTY ADVISOR: _____ (*please print*)

(*signature*)

STUDENTS' UNION AUTHORIZATION

Jordan Gracie
VP Finance & Operations

Shania Boucher
Campus Affairs