

SOCIETY FUNDS REQUEST FORM

*Need **itemized** receipts for reimbursements*

Society Name		
Current Date	Required Date	
Note: In most c	ases, CBUSU requires a minimum of 3 busine	ess days' notice for cheques.
Purpose		
Cheque made payable to a	nd additional instructions:	
Society Signing Officers		
, , ,		
Name	Signature	Position or Faculty Advisor
Name	Signature	Position or Faculty Advisor
Name	Signature	Position or Faculty Advisor
CBUSU Authorization		
Note:	VP Finance & Operations	Society Coordinator
CBUSU VP Finance & Opera	tions	su_vpfo@cbu.c

CBUSU VP Finance & Operations CBUSU Society Coordinator Alex MacNeil, Director Finance & Operations

su_vpfo@cbu.ca su_societies@cbu.ca Alex_MacNeil@cbu.ca