

ACTIVITY FUND CLUB OFFICERS

PLEASE COMPLETE AND RETURN THIS FORM TO YOUR CAMPUS BOOKKEEPER/SECRETARY

NO LATER THAN SEPTEMBER 26TH, 2023

SCHOOL NAME: _____ YEAR 2023-2024

CLUB NAME: _____

PRINT NAME

SIGNATURE

CLUB SPONSOR: _____

PRESIDENT: _____

VICE-PRESIDENT: _____

SECRETARY: _____

TREASURER: _____

*****NOTE: REQUEST FOR PAYMENT FORMS*****

Required Signatures: 1. Sponsor 2. President or Treasurer

Faculty Fund requires 2 signatures

THIS FORM MUST BE IN THE BOOKKEEPER'S/SECRETARY'S OFFICE FOR AUDITING PURPOSES.