

# Expenditure Request Form

Associated Student Body  
Mission San Jose High School

This form must be submitted and approved PRIOR TO the spending or transferring of any funds from a MSJHS ASB account. Please turn this form in before making any purchases **with a copy of CLUB meeting minutes**. An ASB Cabinet comprised of the ASB Officers, 1 Class Officer from each grade, and the school Activities Director will meet on Fridays to process requests. This form must be turned in to Mr. Breazeale's box in the office by **Thursday at 12:30pm** to be reviewed at that week's meeting. Please check msjasb.org to see if your expenditure request form was passed. **If your expenditure request form was approved, please write the number that was assigned to the expenditure request form on the top right hand corner of the requisition form in the area that says: "Requisition # \_\_\_\_\_".**

Date: \_\_\_\_\_

Total Amount Approved: \$ \_\_\_\_\_

To Use Funds From: \_\_\_\_\_

(Club, Class, or Trust Account Name) Account must currently have the money to cover the above expenditure!

Reason, Circle one: Purchase, P.O., Service, Other \_\_\_\_\_

**NOTE:** Money taken from a specific account can only be used for goods/services that apply to that account!

Expenditure approved and discussed in minutes of this organization dated \_\_\_\_\_. A COPY OF MINUTES IS ATTACHED.

Goods or Services (Be Specific):	Vendor, Company, Etc.	Check Payable to:	Amt. \$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_\_  
Club/Organization Representative Signature

\_\_\_\_\_  
Faculty/Advisor Signature

## FOR ASB USE ONLY

Request #: \_\_\_\_\_

Date Reviewed:  
\_\_\_\_\_

Status

Approved

Denied

\_\_\_\_\_

Reason: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
ASB TREASURER

\_\_\_\_\_  
ACTIVITIES DIRECTOR

\_\_\_\_\_  
PRINCIPAL