

**2009-2010 Budget Proposal**

**Due: Stern Center Room 406 on or before February 27, 2009 by 5pm**

*Please refer to the 2008-09 Compass for all details regarding the Student Government Association's funding philosophy and other information on funding to sanctioned organizations.*

**Please print:**

**Organization:** \_\_\_\_\_

**Treasurer Name:** \_\_\_\_\_ **Hearing Representative:** \_\_\_\_\_

**Advisor's Name:** \_\_\_\_\_ **Department:** \_\_\_\_\_

**President signature:** \_\_\_\_\_ **Advisor signature:** \_\_\_\_\_

Request for 2009-2010		<b>Allocations Use Only</b>	
		<b>Approved for 2009-2010</b>	
Programs	\$ _____	Programs	\$ _____
Food	\$ _____	Food	\$ _____
Administrative	\$ _____	Administrative	\$ _____
Travel	\$ _____	Travel	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>	<b>TOTAL BUDGET</b>	<b>\$ _____</b>

**2008-09 Summary**

**Events/Programs/Trips/Speakers for 2008-09:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Fundraising for 2008-09:**

**Amount Raised**

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_

**Did you receive any other assistance (financial, equipment, etc.)? If yes, provide a brief description and/or the amount donated. YES NO**

\_\_\_\_\_  
\_\_\_\_\_

## 2009 – 2010 Budget Request

*Please attach any available information regarding any programs, travel or administrative expenses your organization is anticipating in 2009-2010.*

### I. Programs

Performers/Speakers/Presentations, etc. (list in priority for the college as a whole, not necessarily by overall cost)

1. \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total request for Programs** \$ \_\_\_\_\_

### II. Food (for meetings up to \$200.00)

**Total request for Food** \$ \_\_\_\_\_

### III. Administrative

Office supplies (up to \$35.00) \$ \_\_\_\_\_  
Printing (on campus) \$ \_\_\_\_\_  
Printing (commercial) \$ \_\_\_\_\_  
Equipment \_\_\_\_\_ \$ \_\_\_\_\_

**Total request for Administrative** \$ \_\_\_\_\_

### IV. Travel (please specify if more than one trip is expected)

Purpose: \_\_\_\_\_  
\_\_\_\_\_

Month: \_\_\_\_\_ Destination: \_\_\_\_\_ # students: \_\_\_\_\_

#### Lodging:

# rooms \_\_\_\_\_ X rate per room: \_\_\_\_\_ X # of nights: \_\_\_\_\_ \$ \_\_\_\_\_

#### Transportation:

Gas Receipts: \$ \_\_\_\_\_

Rental/per: \_\_\_\_\_ X # vehicles: \_\_\_\_\_ X # of days: \_\_\_\_\_ \$ \_\_\_\_\_

#### Registration Fee:

per student: \_\_\_\_\_ X # of students: \_\_\_\_\_ \$ \_\_\_\_\_

**Total request for Travel** \$ \_\_\_\_\_