Student Association, Inc.
California Univ. of PA

Reference # _____

Special Allocation Request (See instructions on reverse side)

Date

Organization

Account #

Original Allocation $

Current Balance $

Fundraising $

Requested Amount $

DETAILED JUSTIFICATION OF REQUEST: Include names and student identification numbers of those students who will be attending the conference or event. Itemize transportation costs, lodging costs, meals, and all other expenses incurred. Please attach supporting materials such as conference / event brochures and itineraries if available. Indicate if expenses are actual or estimated. Adhere to SAI Per Diem of $25 per day for meals. Breakfast: $6.00; Lunch: $6.00; Dinner $13.00. (If purchasing, rebuilding, or repairing a fixed asset at a cost of $250 or more, please obtain a copy of the "Capitalization and Bid Policies".) Be prepared to prove fundraising amount.

Advisor Signature

President Signature

Treasurer Signature

For Office Use Only - Do Not Write Below This Line

CABINET: Passed Rejected Other Date: _____

CONGRESS: Passed Rejected Other Date: _____

Student Government President

Financial Secretary