

REQUEST FOR FOUNDATION FUNDS

The Crafton Hills College Foundation requires that ALL requests for disbursement of funds be documented on this form, signed and submitted by the approved Account Manager and accompanied by an invoice or original receipts not to exceed the approved amount. This applies to payment for goods or services, or reimbursements to vendors, faculty, or staff of Crafton Hills College for approved functions.

DEPARTMENT: _____ ACCOUNT NUMBER : _____

EVENT OR ACTIVITY: _____

REASON FOR REQUEST: _____

DATE OF EXPENSE: _____ AMOUNT REQUESTED: \$ _____

TYPE OF EXPENSE:

SUPPLIES: \$ _____ FOOD: \$ _____ CONFERENCE: \$ _____

TRAVEL: \$ _____ EQUIPMENT: \$ _____ PROMOTION/MARKETING: \$ _____

OTHER: \$ _____ / _____
(DESCRIBE TYPE OF EXPENSE)

MAKE CHECK PAYABLE TO: _____

MAIL TO: _____

OR NOTIFY ME WHEN THE CHECK IS READY, AND I WILL PICK UP THE CHECK FROM THE FOUNDATION OFFICE:

CALL: _____ E-MAIL: _____

The CHC Foundation is a non-profit tax-exempt corporation organized under the laws of the state of California and Section 501(c)(3) of the Internal Revenue Code of 1986, as amended. By signing this form, the requestor agrees to utilize all funds in such a way as to never endanger the Foundation's exempt status as determined by the Internal Revenue Service code governing 501(c)(3) public charities.

NAME OF REQUESTOR: _____

SIGNATURE OF REQUESTOR: _____ DATE: _____

APPROVED BY: _____ DATE: _____

RETURN TO: Michelle Riggs, *Director of Community Relations and Resource Development*
11711 Sand Canyon Road - CTB 209, Yucaipa, California 92399-1799

FOR OFFICE USE ONLY:

APPROVED AMOUNT: \$ _____ FUND BALANCE: \$ _____ AS OF: _____

ACCOUNTING CODE: _____

SIGNATURE: _____ DATE: _____

For additional information or questions,
Please Contact:
Michelle Riggs
mriggs@craftonhills.edu or 909.389.3391

