

# ASMC Budget Transaction Request

Please allow 5 business days for payment process to be initiated by ASMC Accountant

## IDENTIFICATION INFORMATION (REQUIRED FOR ALL TRANSACTIONS)

Student Organization \_\_\_\_\_

Today's Date \_\_\_\_\_

Event Name \_\_\_\_\_

Event Date \_\_\_\_\_

Student Submitting Form \_\_\_\_\_

Mills ID \_\_\_\_\_

Student Email Address \_\_\_\_\_

Student Local Phone Number \_\_\_\_\_

Authorizing Signature \_\_\_\_\_

(required for processing)

## REIMBURSEMENT

Use this section if someone in your organization has spent money and needs to be reimbursed for expenses.

Reimbursement Directions

1. Complete reimbursement section of form and attach receipts to this form.
2. Submit form to the Accountant's INBOX at Cowell Room 108.
3. Pick up the completed reimbursement form in the Accountant's OUTBOX after being notified by email.
4. Take form to the Cashier's Window in Sage Hall during the hours of 9:30am-2pm, M-F to get cash or to process check in the mail.

REIMBURSEMENT IS FOR

Student Submitting Form

Another Student Who Incurred Expense \_\_\_\_\_

Student Name and Mills ID

College Staff or Faculty \_\_\_\_\_

Staff or Faculty Name and Mills ID

Other \_\_\_\_\_

Name and relationship to College (including SSN)

TOTAL OF ATTACHED ORIGINAL RECEIPTS \$ \_\_\_\_\_ (please write name & organization on receipts)

Signature of person being reimbursed: \_\_\_\_\_

## CASH ADVANCE

Use this section if someone in your organization needs money to purchase items for your organization.

Cash Advance Directions

1. Cash advance must be submitted no later than 5 business days prior to the event.
2. Complete cash advance section of this form and submit it to the Accountant's INBOX.
3. Pick up the appropriate form from wall pockets located at the cashier's window after being notified by email.
4. Sign the form at Cashier's Window in Sage Hall during the hours of 9:30am-2pm, M-F, and pick up cash.
5. Return receipts and any remaining money labeled with name and organization in the given envelop to the cashier's window before the Cash Advance Deadline.
6. Cash Advance Deadline is 3 business days after event. If deadline is not met, amount of cash advance will be charged to your student account.

MATERIALS TO BE PURCHASED: \_\_\_\_\_

TOTAL AMOUNT OF CASH REQUESTED: \$ \_\_\_\_\_

Approved by ASMC Accountant or Advisor \_\_\_\_\_

Date \_\_\_\_\_

# ASMC Budget Transaction Request

Please allow 5 business days for payment process to be initiated by ASMC Accountant

## CHECK REQUEST

Use this section to pay an outside vendor or independent contractor, such as a DJ or guest speaker.

Check Request Directions

1. Outside vendor must provide SSN or Tax ID number and sign below to certify the correct numbers are given.
2. Submit completed check request section of this form to the Accountant's INBOX at Cowell Room 108.
3. Payment will be processed, and payee will receive payment via mail or at cashier's office (depending on preference) within two weeks.

Payee Legal Name: \_\_\_\_\_ (as should appear on check)

Check will be picked up at Cashier's Window

Payee Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Amount of Check: \$ \_\_\_\_\_ Type of Business:  Individual/Sole Proprietorship  Partnership  Corporation

Social Security Number or Tax ID: \_\_\_\_\_

*I hereby certify to Mills College that the Taxpayer ID shown on this form is my correct Taxpayer ID. I am not subject to backup withholding, and I am a US citizen or resident alien.*

Payee Signature: \_\_\_\_\_ (required for processing)

## DEPOSIT

Use this section to deposit any revenue or gifts for your organization.

Deposit Directions

1. Complete the deposit section of this form and put the checks and cash in an envelope labeled with your name and organization in the Accountant's INBOX at Cowell Room 108.
2. Notify the Accountant by email at [asmcfinance@mills.edu](mailto:asmcfinance@mills.edu) that you have deposited money in her inbox.
3. The ASMC Accountant will deposit money in account designated below.

TOTAL CHECKS: \$ \_\_\_\_\_

TOTAL CASH: \$ \_\_\_\_\_

TOTAL DEPOSIT: \$ \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_ ACCOUNT NAME: \_\_\_\_\_

Deposit description: \_\_\_\_\_  
\_\_\_\_\_

## INTERNAL TRANSFER OF FUNDS

Use this section to transfer funds from one Mills account to another.

Internal Transfer Directions:

1. Determine the account number and amount of funds to be transferred.
2. Complete the internal transfer section of this form and place it in the Accountant's INBOX at Cowell Room 108.
3. The ASMC Accountant will file the paperwork for the transfer.

TOTAL TRANSFER AMOUNT: \$ \_\_\_\_\_

FROM ACCOUNT NUMBER: \_\_\_\_\_ ACCOUNT NAME: \_\_\_\_\_

TO ACCOUNT NUMBER: \_\_\_\_\_ ACCOUNT NAME: \_\_\_\_\_

Transfer description: \_\_\_\_\_  
\_\_\_\_\_

Approved by ASMC Accountant or Advisor \_\_\_\_\_

Date \_\_\_\_\_