



# Funding Request Reconciliation (FRR) Form

University of St. Thomas – *Council of Clubs*

Today's Date:			
Club Name:			
Event Name:			
Date(s) of Event:		Number of Attendees:	

<b>Amount of Funding received from COC:</b>	\$
<b>Amount of Club Contribution:</b>	\$
<b>Revenue collected from event:</b>	\$
<b>Total Expenses:</b>	\$

➤ Please attach **copies** of all receipts to this form and submit **original** receipts to the UST Business Office with a Check Request Form to receive a reimbursement.

➤ In the grid below, itemize your event's expenses. If you need more space, please attach an excel file or email the list to coc-treasurer@stthom.edu.

Expenses	Descriptions	Total
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

Income / Revenue	Descriptions	Total
		\$
		\$
		\$
		\$

Preparer's Name:	
Preparer's Phone:	
Preparer's Email:	
Club Adviser's Name:	
Club Adviser's Email:	