

# UCA FOUNDATION FUNDS REQUEST FORM

Invoice Number: \_\_\_\_\_

Date on Invoice \_\_\_\_\_

Pay to the order of: \_\_\_\_\_

Current UCA Employee? Yes No

If payable to UCA, UCA Department Index #: \_\_\_\_\_

Current UCA Student? Yes No

Vendor Address: \_\_\_\_\_

Receiving academic credit  
for this activity? Yes No

Invoice Amount: \_\_\_\_\_

Banner ID: \_\_\_\_\_

Project Number: \_\_\_\_\_ Project/Fund Name: \_\_\_\_\_  
(located in the left hand corner of your project activity report)

Description of Expenditure/Additional Info: \_\_\_\_\_

Fund Director (required) Print: \_\_\_\_\_

Signature: \_\_\_\_\_ Date signed \_\_\_\_\_

Dean or VP (required) Print: \_\_\_\_\_

Signature: \_\_\_\_\_ Date signed \_\_\_\_\_

Request Contact (required) Name: \_\_\_\_\_

Email: \_\_\_\_\_

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## FOUNDATION OFFICE USE ONLY

Account Number: \_\_\_\_\_ Description: \_\_\_\_\_

Account Number: \_\_\_\_\_ Description: \_\_\_\_\_

Account Number: \_\_\_\_\_ Description: \_\_\_\_\_

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

Check Processed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Check Number: \_\_\_\_\_