

# Matching Funds Request

## For Clubs & Organizations

Club/Organization: \_\_\_\_\_ Event Name: \_\_\_\_\_

Place of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_

Club Member: \_\_\_\_\_ Club Advisor: \_\_\_\_\_

Fundraiser  Event

Funds Raised to be Matched \$ \_\_\_\_\_

Current Funds Matched to Date \$ \_\_\_\_\_

Club Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

ASWNMU Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Note: Attached to this document should include your Record of Receipt, General Ledger, and Trial Balance)

### ASWNMU Use Only

Turned in to: \_\_\_\_\_

Date & Time: \_\_\_\_\_

Received Record of Receipt: \_\_\_\_\_

Received General Ledger: \_\_\_\_\_

Received Trial Balance: \_\_\_\_\_

Funds to be Matched: \_\_\_\_\_

Total Funds Matched: \_\_\_\_\_

Available Matching Funds: \_\_\_\_\_