



Student Association

State University of New York College at Oneonta

Co-Sponsorship Budget Page

(This form is to be used to initiate a co-sponsored event)

Event Title: _____

Event Date: _____

Purpose of Event: _____

Primary Organization: _____

President's Signature: _____

Total Budget: _____

Advisor's Signature: _____

<p>Budget Breakdown:</p> <p>Category: _____ Amount: _____</p> <p>Category: _____ Amount: _____</p> <p>Category: _____ Amount: _____</p> <p>Category: _____ Amount: _____</p> <p>Category: _____ Amount: _____</p> <p>Category: _____ Amount: _____</p> <p>Category: _____ Amount: _____</p> <p>Category: _____ Amount: _____</p> <p>TOTAL: _____</p>	<p>TOTAL funding must equal or exceed Budget before special account is created.</p>	<p>Funding Sources:</p> <p>Attach signed sheets from each additional organization/department sponsoring.</p> <p>Primary*: _____ Amount: _____</p> <p>Org/Dept: _____ Amount: _____</p> <p>Org/Dept: _____ Amount: _____</p> <p>Org/Dept: _____ Amount: _____</p> <p>Org/Dept: _____ Amount: _____</p> <p>Org/Dept: _____ Amount: _____</p> <p>Org/Dept: _____ Amount: _____</p> <p>Org/Dept: _____ Amount: _____</p> <p>Org/Dept: _____ Amount: _____</p> <p>TOTAL: _____</p>
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** Will be transferred based on form if separate account is created. All primary organizations funding will be expended before utilizing other funds. Any funds not utilized will be returned to the funding sources in proportion to donations.*

Office Use Only	Date Received: _____ Approved by: _____
	Should a separate account be created? <input type="checkbox"/> YES <input type="checkbox"/> NO
	Account Utilized/Created: _____
	List all transfers/deposits _____

	Any funds remaining after the event? <input type="checkbox"/> YES <input type="checkbox"/> NO
List all disbursements _____	
