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ID Card Funds Request Form

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Kean University, "ID Card Funds Request Form" (2021). *Evidence Inventory*. 129.
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ID Card Funds Request Form

Abstract

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Keywords

ID Card Funds Request Form



**Office of Student Accounting
ID Card Funds Request Form**

The Office of _____ is requesting ID Card Funds for Staff or Student use (circle one) to obtain meals in the university eateries or external eateries.

Date of Submission: _____

Event/Program Name: _____

Date of Event/Program (or date range): _____

Names & Kean ID Numbers (or attach sheet):

Name	Kean ID	Name	Kean ID

Justification for Request: _____

Funds Requested Per ID Card: \$ _____ Total Funds Requested: \$ _____

General Ledger Account: _____ Purchase Order #: _____

Name of Requestor: _____ Ext. _____

Signature of Requestor: _____

Office Use Only:

Department Head (Signature/Title)

Date

Divisional VP (Signature/Title)

Date

Budget Office (Verification of Funds)

Date

Andrew Brannen, VP Administration and Finance

Date

Director of Student Accounting (Approval for Processing)

Date

SA Office
Date Processed: _____
CS Gold Plan #: _____
CS Gold Plan Name: _____
Processed By: _____