

EASTERN CONNECTICUT STATE UNIVERSITY
HOUSING & RESIDENTIAL LIFE
THEME HOUSING RETREAT

Supplies List

	Supplies	Vendor	Cost
1			\$
2			\$
3			\$
4			\$
5			\$
6			\$
7			\$
8			\$
9			\$
10			\$
11			\$
12			\$
13			\$
14			\$
15			\$
16			\$
17			\$
18			\$
19			\$
20			\$
21			\$
22			\$
23			\$
24			\$
25			\$

PO Vendor Requests

1. _____
2. _____
3. _____
4. _____
5. _____

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Paperwork: What You Need For Each

- 1) Cash Advance (except with travel)
 - a. SABO Voucher Form correctly filled out
 - b. Program request
 - c. Print off of the calendar event
- 2) P Card Request
 - a. TBD
- 3) Travel Authorization Form (TA)
 - a. Completed TA form
 - b. Program request
 - c. Print off of the calendar event
 - d. List of students attending program (can be tentative list)
 - e. Van request form completed
- 4) Big-Y Form
 - a. Big-Y Request form
 - b. Program request
 - c. Print off of the calendar event
- 5) Purchase Order
 - a. PO form
 - b. Receipt
 - c. Program Request
 - d. Calendar Request
- 6) Vendor Payment or transfer to another Eastern Organization
 - a. SABO Form
 - b. Receipt
 - c. Program Request
 - d. Calendar Request

*Paperwork must be turned in at least 2 weeks prior to any event (3 weeks for travel) that requires funding to ensure time to process.

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Paperwork Game

Gather and complete the necessary paperwork to put on the programs below:

1. In order to explore the history of Batman and Robin's original adventures, we will be travelling to Comicon in Boston MA and providing each participant with \$15 to spend on lunch at Quincy Market.
2. As Education majors we have decided to purchase school supplies at Walmart and some candy treat at Big Y to bring with us to Sweeney School when we hold our afterschool program next month.
3. We would like to purchase organic potting mix and inorganic potting mix in order to compare the growth rate of basil plants indoors over the course of the winter months Mackey's farm and pet supply has a large selection of soils.
4. As leaders on campus we would like to showcase some of the work that Theme Housing groups have done over the year, so the Leadership Theme would like to reserve the BTR and order food from Tony's Pizza for a campus-wide event.
5. Being new to the campus, F.Y.R.E wants to show Eastern what freshmen are made of by hand making team jerseys for the Dean's Cup competitions.
6. The Cultural Celebrations Theme is working hand-in-hand with the Intercultural Center to host the most amazing cookoff Eastern has ever seen. The supplies for the food can be found at Big Y and the Oriental Groceries on Boston Post Rd.
7. The VP of MALES has recently landed a role on the upcoming play and MEN have decided to reserve 15 tickets with the Drama Society to see the performance.

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Eastern Connecticut State University
SABO Gelsi & Young Room 341
83 Windham St – Willimantic, CT 06226
Phone (860) 465-5285 Fax (860) 465-5180

(A) Vendor/Payee Information:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
FEIN# Eastern ID: _____
Phone: (____) _____ Fax (____) _____

(B) Required Signatures:

Requestor/Treasurer _____ Date _____
Advisor/Hall Director _____ Date _____
Director of Student Activities/Residential Life _____ Date _____
Dean of Student Affairs (Required if \$2,500 and over) _____ Date _____
VP of Student Affairs (Required if \$2,500 and over) _____ Date _____

(C) Mailing Instructions:

Mail to Payee or Vendor Date Mailed ____/____/____ Initials _____
 Hold for Pickup Do Not Mail Date Check Needed ____/____/____
Picked Up by: _____ Date _____
 Other Instructions _____

(D) Check Applicable box:

REMEMBER: SALES TAX IS NOT REIMBURSABLE
 Cash Advance - Date check needed ____/____/____
 Reimbursement (Receipts attached)
 Vendor Payment
 Vendor Payment for Services (attach Honorarium, PSA)
 Transfer to another Club/Organization

(E) Club/Organization:

Date of Minutes ____/____/____ Motion # _____
Attached copy of minutes required for all transactions.

Index#	Account#	Amount
Total \$		

Description/Document Text Information:

Clubs/Organizations are exempt from sales tax on equipment and supply purchases.

For SABO Use Only

Check Due Date ____/____/____ Verified By _____
Vendor Invoice# _____ Date _____ Banner #I _____
Index# _____ Account: _____ Amt: _____
Index# _____ Account: _____ Amt: _____
Final Payment _____ Check # _____

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Theme Housing Programming
Big Y Card Form



EASTERN
CONNECTICUT
STATE UNIVERSITY

Office of Housing and Residential Life • Division of Student Affairs
83 Windham Street Willimantic, Connecticut 06226-2211 • (860)465-5297

Date of Minutes: _____ Motion #: _____

RA Program Number: _____

RHA Member Requesting Card: _____
Print Signature

Hall Director Approval: _____
Print Signature

Amount Authorized \$ _____

Name of Residence Hall: _____

Hall Account Number: _____

Date and Time Card Used: _____

Total Value of Receipts: _____

Receipts Received: _____
Yes No

Receipts Attached: _____
Yes No

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PURCHASE ORDER INFORMATION FORM

Eastern CT State University

PO #: _____

Vendor: _____

Date of Program: _____

Program Request Number: _____

Program Title: _____

_____ Hall

Amount spent: _____

Circle One:

1. Theme Housing Account Number _____

Staff Signature: _____ Date: _____

**EASTERN CONNECTICUT STATE UNIVERSITY
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CSU Travel Authorization

ECSUFRS - 30 (09/13)

Eastern Connecticut State University
83 Windham Street
Willimantic, CT 06226

TA#

Use this form for all travel
Forward after signatures to the Travel Office
Central Air Reservations: 1-800-858-4456

Traveler Name:		Work Phone Ext:		Original TA	Revised TA
Title:		Employee No:		TA No.	
Official Duty Station:		Eastern/Banner ID:		Date of Request:	
Collective Bargaining Unit: AAUP		MGM	SUOAF-AFSCME	Home Phone:	
Itinerary		DEPART		RETURN	
HOME/DUTY	TO	DATE	HOUR	DATE	HOUR
					CARRIER INFO FLIGHT/RAIL/BUS

Object and Necessity of Travel (Attach substantiating document)

<input type="checkbox"/> 01 Paper Presentation	<input type="checkbox"/> 03 Research	<input type="checkbox"/> 05 Team Travel	<input type="checkbox"/> 07 Faculty Development	<input type="checkbox"/> 09 Other Activities *
<input type="checkbox"/> 02 Conf/Workshop	<input type="checkbox"/> 04 Recruiting (Athletics)	<input type="checkbox"/> 06 Training	<input type="checkbox"/> 08 Univ Development	<input type="checkbox"/> 09 Other (describe) **
		**		

Type of Transportation

AIR	Central Reservation	Outside Agent	Personal Car -Current Copy of Insur Policy Req	Exp Date
RAIL	Central Reservation	Outside Agent	State Owned Car	Other Specify
	Parking Permit Requested	Name of Riders		

Registration Prepaid by Agen	Yes	Vendor's FEIN #(Mandatory)		Voucher No.	
Hotel Prepaid by Agency	Yes	Vendor's FEIN #(Mandatory)		Voucher No.	
Bus Prepaid by Agency	Yes	Vendor's FEIN #(Mandatory)		Voucher No.	
Travel Advance Required	Yes	Amount Requested	\$	Voucher No.	

ost (Itemize) Note: Rates for meals and lodging should not exceed those provided for in standard Travel Regulations and in Collective Bargaining Agre

Airfare/Rail	_____	Lodging (Per diem rate)	_____
Taxi/Limo	_____	Conference Hotel	_____
Rental Car/Bus	_____	Hotel Tax	_____
Personal Mileage _____ x #####	\$0.00	Meals (Per diem rate)	_____
Parking/Toll	_____	Registration	_____
Other/Specify	_____		
Total Cost			\$0.00

Comments:

Banner Index	Account	Amount	Authorized Signature	Banner Index	Account	Amount	Authorized Signature

SABO ONLY

Employee Signature: _____	Requestor/Treas: _____	Date: _____
Approved by: _____	Advisor: _____	Date: _____
Approved by: (Dean/Dir) _____	Dir Student Activities/Res Life _____	Date: _____
Authorized by: (Agency Head) _____	Dean of Students: _____	Date: _____
Travel Office Approval/Data Entered by _____	VP Student Affairs: _____	Date: _____