

SUB-BOARD I, INC. ENCUMBRANCE REQUEST FORM



ALL INFORMATION MUST BE **TYPED** OR **CLEARLY PRINTED**



VENDOR NAME _____

VENDOR ADDRESS _____

CITY STATE ZIP

ACCOUNTING OFFICE USE ONLY	
P.O. NO.	
REVIEWED	
VENDOR NO.	
1099 TR FA PP AR Adv PY	

INSTRUCTIONS: Submit this form to Student Life for administrative approval after you have received officer approval from your organization. The form will then be submitted to the SBI Accounting Office. You **must** submit this form **before** placing an order for goods or services, or **before** making a purchase. All purchases **MUST** receive **prior approval**, i.e. funds must be encumbered **before** a purchase is made.

Funds will be encumbered and a Purchase Order (REF form) will be issued for authorization by 2 officers. After the officers have authorized the Purchase Order, you may **then** place the order or make the purchase.

After goods or services have been received, complete the **Receiving Report** section of the Purchase Order. Payment will be made to the vendor after you submit the completed Purchase Order to the SBI Accounting Office, together with **adequate, original vendor documentation** (eg, vendor invoice, store receipt, signed contract for services, etc.)

In rare instances when a vendor requires payment in advance, the purchase must be documented within **ten days**. Advance privileges may be lost if prior advances are not documented

Payments for rentals or services by independent contractors cannot be made to third parties, only to the vendor who provided the service, and require IRS Form W-9, or an acceptable substitute.

- ** IMPORTANT ****
- ☐ **HOLD CHECK FOR PICK-UP**
☐ **MAIL CHECK TO VENDOR ADDRESS**

APPROPRIATION ACCOUNT NUMBER	
FUND	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Number _____</div> <div style="width: 55%;">Name _____</div> </div>
DEPARTMENT	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Number _____</div> <div style="width: 55%;">Name _____</div> </div>
LINE ITEM	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Number _____</div> <div style="width: 55%;">Name _____</div> </div>
PROJECT (if applicable)	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Number _____</div> <div style="width: 55%;">Name _____</div> </div>

REQUESTED BY _____ **DATE** _____
ADMINISTRATIVE APPROVAL _____ **DATE** _____

The approval by college officials indicates only that the purpose of the fiscal commitment is in compliance with the provisions of the Trustee's policy governing student activity fees, and that the commitment does not constitute a fiscal obligation of the State of New York.

QTY	COMPLETE DESCRIPTION OF PURCHASE (- What? - Where? - When? - Why? - etc.... -)	AMOUNT
A COMPLETE DESCRIPTION OF THE PURCHASE IS REQUIRED IN ORDER TO PROPERLY PROCESS THIS REQUEST		TOTAL AMOUNT _____