

eTransfer for Disbursement For amounts less than \$2500

Must attach receipts/invoices/minutes for disbursement

Please allow 3 business days to process fund transfer. MUST have Canadian Financial Institution account.

Organization/Club/Department Name:			4053 CUS c/o AMS of UBC Vancouver	
	Date:			
Category	Detailed 1	Description:	Account Code	Amount
			TOTAL	0.00
Payee (Legal Name): _				
Pay	yee's Email Address:			
Confirm Payee Email address:				
Payer	e's Cellular Number:			
Payee's Student ID Number:				
Treasuer's Email Address:				
Treasur	er's Phone Number:			
Treasurer's A	pproval (Signature):			
	For Office Use Only			
	Verification:			
	Date:			