DOS CHARITABLE CONTRIBUTIONS REQUIRED APPROVALS
To be attached to expense report

Benefitting Non-Profit Organization: ______________________________________

Description of the contribution:
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

COA string and POET information to be charged and name of department/student organization:
_____________________________________________________________________
_____________________________________________________________________

Requested By: ___________________________________________ Date: __________

Dean Approval: ___________________________________________ Date: __________

Provost (or designee) Approval: _____________________________ Date: __________
(Donations over $1,000)