

# Student Initiated Access Committee

## Order Request Form

PLEASE PRINT LEGIBLY

**Project Name: (Please Check One)**

- AIR
- HOPE
- MAPS
- PIER

- SHAPE
- SPACE
- MEChA Xinachtli
- SIAC

**Funding Source**

(Please Check one)

- SIAC AY
- SIAC Summer
- SIAC Chair
- Other/Memo  
Date of Memo \_\_\_\_\_

**PROGRAM/EVENT NAME:** \_\_\_\_\_

**NAME:** \_\_\_\_\_  
(NAME OF PERSON COMPLETING THIS FORM)

**EMAIL:** \_\_\_\_\_ **PHONE NUMBER:** \_\_\_\_\_  
(CONTACT INFORMATION OF PERSON COMPLETING FORM)

**BUDGET LINE ITEM TO BE CHARGED:** \_\_\_\_\_  
(E.G. ADVERTISING, PRINTING, TRANSPORTATION)

**DESCRIPTION OF GOODS OR SERVICES:**

Please describe the event, (who, what, where, and why?) If goods are for food/beverages, please provide a list of attendees. **ALWAYS INCLUDE ORIGINAL ITEMIZED RECEIPTS.** If it's for a reimbursement, please fill out the PAYEE section below and include bank statement if goods were purchased with a card. For mileage reimbursement please provide locations where you traveled.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**GRAND TOTAL\$:** \_\_\_\_\_

**PAYEE (vendor/person to be paid)** \_\_\_\_\_

**HOME ADDRESS** \_\_\_\_\_

**CITY/STATE/ZIP CODE** \_\_\_\_\_

**PHONE NUMBER** \_\_\_\_\_

**CONTACT PERSON** \_\_\_\_\_

**COMPLETE THE FOLLOWING FOR PAYMENT:**

**SOCIAL SECURITY #** \_\_\_\_\_

(For payment to individual)

**Federal Tax ID#** \_\_\_\_\_

(For payment to Business)

**UC EMPLOYEE?** YES \_\_\_ NO \_\_\_ **UID#** \_\_\_\_\_

**CALIFORNIA RESIDENT?** YES \_\_\_ NO \_\_\_

**US CITIZEN?** YES \_\_\_ NO \_\_\_

**E-MAIL**

**\*\*\*FOR MILEAGE OR FOOD/BEVERAGES REIMBURSEMENT PLEASE PUT DOWN YOUR UCLA E-MAIL IF YOU ARE A STUDENT EMPLOYEE**

**APPROVALS:**

**I CERTIFY THAT I AM AUTHORIZED TO APPROVE EXPENDITURES FOR THIS PROGRAM.**

X \_\_\_\_\_  
**PROJECT DIRECTOR'S SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**EMAIL ADDRESS/PHONE**

X \_\_\_\_\_  
**SIAC CHAIR SIGNATURE/DATE**

X \_\_\_\_\_  
**SIAC ADVISOR SIGNATURE/DATE**

-FOR OFFICE USE ONLY-

ACCOUNT # \_\_\_\_\_ SUB/OBJECT \_\_\_\_\_ / \_\_\_\_\_ PROJECT/SOURCE \_\_\_\_\_

VENDOR # \_\_\_\_\_ INVOICE# \_\_\_\_\_ RECHARGE ID# \_\_\_\_\_

PAC ORDER#3731 \_\_\_\_\_ PAC ORDER#3731 \_\_\_\_\_

DATE PREPARED: \_\_\_\_\_ PREPARER \_\_\_\_\_ DATE ENTERED \_\_\_\_\_ Entered By: \_\_\_\_\_