

Funding Award Form:

Porter Senate Discretionary Budget Proposals

Please complete Section I and attach this form to your Porter Senate Discretionary Budget Proposal form.

Proposals without this form attached at time of submittal cannot be considered for funding.

I For Student Representative:

Event Name & Date: _____

Organization Name: _____

Amount Requested: \$ _____ Date Submitted: _____

Distribution of Funds: Purchase Order Transfer of Funds (complete below)

SOMeCA Orgs:

SOMeCA Advisor Name: Angela Harris, Aeharris@ucsc.edu Arlan Mendiola, amendiol@ucsc.edu
 Cory Fong, Comfong@ucsc.edu Daisey Miranda, dmiranda@ucsc.edu
 Don Williams, Dwilliam@ucsc.edu Katherine Canales, Kcanales@ucsc.edu
 Scott Leiserson, Sleisers@ucsc.edu Susan Watrous, Swatrous@ucsc.edu
 Sayo Fujioka, Sfujioka@ucsc.edu Other: _____

RCs, College or University Sponsored Orgs & Individuals:

Sponsoring Unit: _____

Sponsor Contacts name / e-mail: _____ / _____

Sponsor's FOAPAL (Account # for transfer of funds if approved): _____

For Porter Senate:

2 Amount Approved: \$ _____ *All unused funds to be must credited back to Porter Senate*

If restricted (stipulations) please specify below:

College / Senate representative: _____ Date: _____

For Administrative Use:

	Fund	Organization	Account	Programs	Activity	Amount
Debit	20189	764550	001280	76	PCS	\$
Credit						

CPC Signature: _____ Date E-mailed to SOAR: _____

College Fiscal Contact, Name: Mary J. Sierra E-mail: mjsierra@ucsc.edu Phone: 9-2017

SOMeCA/Sponsor Advisor: _____ Date to Fiscal: _____