Student Musical Activities
We Spent Money Form

Attach any receipts, packing slips, or other documentation available. Vendor can not be paid until this form is completed and signed.

Vendor name: ___________________________ Date Purchased/Delivered: ___________________________
Vendor invoice #: ___________________________ Purchase Order #: ___________________________

Brief Description of Good or Services Received:

Total Amount (when known): ______________

I certify that the goods or services described above were properly received by the University.

Print Name ___________________________ Sign (Can not have signed Expense Authorization) ___________________________ Date ___________________________

For Administrative Office Use Only

BFS Received Date BFS Approved Date QB Entered Date

Voucher #