※ 間 **ド** MCGSS

The Macdonald Campus Graduate Students' Society

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Cheque number:	
Receipts included	
Cheque cashed	

		Mcgss E	XPENSE FORM			
	☐ Event	☐ Equipment	□ Travel Award	□ Donation		
Person requesting the expense						
1)	Name					
2)	Event name					
3)	Event date(s)			☐ Recurring		
4)	Event location					
5)	Amount requested	\$				
6)	Cheque recipient name			-		
Contact person						
7)	Name					
8)	Email address			N III		
9)	McGill ID Number		7			
10)	Phone number	Mobile:	Hon	ne:		
Disc	laimer			•		
11) I, the contact person named in item 7 above, am authorized to complete and submit this form on behalf of MCGSS of which I am a member. I will attend the event described in this form and I take full responsibility for ensuring that this event satisfies all the Post-Graduate Students' Society of McGill University's rules and regulations.						
	Signature of contact person:		Date:	N		
Note: Any applicant found to have made an application under false pretenses will be required to immediately return any funds disbursed. The PGSLC and the MCGSS President may request additional information in order to ensure that applications are truthful and complete.						
Expe	ense Authorization					
	Name:					
Ex	ecutive position:	MCGSS President	And/Or MCGSS Treat	asurer		
Signature:						