

A&S Expense Justification Form

Account/Requestor's Information	SmartTag Name _____	SmartTag # _____
	Initiator: Account Manager's Name _____	Account Manager's Job Title _____
	Account Manager's Signature _____	Date Signed _____
	Phone Number _____	FAU Email _____
	FAU Delivery Address (If purchase will be delivered): _____	

Event Information \ Benefit and Purpose	Event Name (If Applicable) _____	Event Date (If applicable) _____
	Purpose of the Purchase _____	
	Benefit of Purchase to FAU/State _____	

Purchase Information	Vendor Name _____
	Type of Purchase: General Merchandise, Off Campus Food Vendor, Promotional items, Printed items, Performers, Speakers, Equipment Rental, Office Depot, or Amazon On Campus Food Vendor Technology (software, computers, monitors) FAU Trademark Business Cards, Stationary, or Name Badge Online/Pcard Purchase Pcard Holder: _____ Email: _____ On campus Department (Student Union, Campus Rec, Parking Services, Business Services, OIT) Travel Reimbursement (A&S Staff only)
	Purchase Amount _____
	Expense Line _____

Authorize Signatures *	Advisor's Signature (For Student Account Managers Only) _____	Date _____
	>=\$1000 Director's Signature (Only if Initiator is not a Director) _____	Date _____
	>=\$3000 AVP Signature _____	Date _____

Last updated March 2021* Download and save to sign electronically

ASAB Approval	
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