

Officer Signature Card for Undergraduate Student Government Funded Organizations

Date _____

Club/Organization _____

If you do not wish your Name or Phone Number given out as a contact person for your Club or Organization, please check the box under your signature.

We, the undersigned officers of _____ recognize our responsibility, to follow the rules and regulations concerning use of funds as allocated by the USG. In addition, our signature notes the receipt of a copy of the financial policies and procedures for USG.

President Information:	Treasurer Information:
Print Name _____	Print Name _____
Address _____	Address _____
Tel.# _____	Tel # _____
Email _____	Email _____
Signature _____	Signature _____
<input type="checkbox"/> Please do not release my name or phone #	<input type="checkbox"/> Please do not release my name or phone #

Secretary Information:	Vice President Information:
Print Name _____	Print Name _____
Address _____	Address _____
Tel.# _____	Tel # _____
Email _____	Email _____
Signature _____	Signature _____
<input type="checkbox"/> Please do not release my name or phone #	<input type="checkbox"/> Please do not release my name or phone #

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Signatures Below Required for LEG only

Senator #1 Information:	Senator #2 Information:
Print Name _____	Print Name _____
Address _____	Address _____
Tel.# _____	Tel # _____
Email _____	Email _____
Signature _____	Signature _____
<input type="checkbox"/> Please do not release my name or phone #	<input type="checkbox"/> Please do not release my name or phone #

RHD Information*	
Name: _____	Signature _____

Please do not release my name or phone #

*The RHD is not an official signature on USG account.