

## Contract Information Form (A&S Fees)

**This form is for: 1) Purchases of services (speakers, DJs, entertainers, consultants, graphic designers) and 2) Purchases of expenses from vendors requiring contract (inflatables/carnival equip/facility rentals)**  
**All contracts must be taken to Billie Pope in the Student Activities Center, A305J Oglesby Union 644-6710 or contact Billy Dahlgren at A305H Oglesby Union 645-7364 for event planning and/or contract assistance**

**Office Use Only:**

<b>REQ#:</b> _____	<b>PO#:</b> _____
<input type="checkbox"/> flyer	<input type="checkbox"/> Fin Statement
<input type="checkbox"/> Outstanding Receipts	
<input type="checkbox"/> Account Balance	

**What budget category does this fall under?**

- 1)  Contractual Services (speakers, DJs, entertainers, consulting, etc)  
 2)  Expense (inflatable/carnival equipment rentals, facility rentals)  
**\*\*\*If this falls under the Expense category, please attach an itemized quote/list of the purchase\*\*\***

**Organization Information:**

Organization's Name
Budget Number
Organization Email
Individual Initiating Request/Event Chair
Telephone No.
Email Address

**Contract Payee/Company Information:**

Make Check Payable To
Address
Address Line 2
Telephone No.
Fax No.
Federal Employee ID or Social Security No.

**Event Information:**

Date of Event: _____	Start/End Time: _____
Location: _____	Anticipated Attendance: _____
Description of Event: _____	
Have you completed a Special Events Permit? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If not, you MUST complete one at <a href="http://www.union.fsu.edu/eventplanning">www.union.fsu.edu/eventplanning</a> 10 business days prior to event	
Is the event open and free to all FSU students? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Admission Fee: Non-Students \$ _____	
<b>NOTE: Event MUST be free to all FSU students if any A&amp;S funds are being used</b>	
Will event information be advertised? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how? _____
<b>***please attach a flyer of the event to this form***</b>	

**Contract Information:**

Performer/Company Contact: _____	Phone: _____
Total Cost \$ _____	Type of Service: _____
<b>If the cost is \$4000 or more for speakers, Senate approval must be obtained</b>	
Is payment required day of show? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Must provide justification for day of show payment</b>
Check needed by: _____	
<b>TO BE COMPLETED BY BILLIE POPE</b>	
Will artist/agency/company provide own contract? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If yes, please attach contract to form and give to Billie Pope for processing, A305J Oglesby Union</b>	

**Organization (Complete Form) → SGA Accounting (Budget Signature) → Billie Pope (Contract Administration) → SGA Accounting (Processing)**

- |   |    |       |             |
|---|----|-------|-------------|
| Organization's Authorized Signature                     | 1. | _____ | Date: _____ |
| Organization's Authorized Signature                     | 2. | _____ | Date: _____ |
| Budget Authority (Accounting Office)                    | 3. | _____ | Date: _____ |
| Billie Pope, Contract Administrator<br>SGA Treasurer or | 4. | _____ | Date: _____ |
| COGS Speaker/Treasurer                                  | 5. | _____ | Date: _____ |
| Final Approval Accounting Office                        | 6. | _____ | Date: _____ |