MGA Foundation

100 University Parkway, A-208
Macon, GA 31206 -5145 478-471-2732
james.nessing@mga.edu

Disbursement Request

	Signature	Date
Initiator/Project Manager:		
Pres/VP/Division or Dept. Director:		
MGA Foundation Executive Director:		

Submit the Disbursement Request, with receipts attached, to the Advancement Office, A-208.

Submitted by: _____ (Please Print)

Make Check Payable to:

Name: _____
SS# (if individual) _____
Address: _____
City: _____ St. _____ Zip _____

Mailing Address if Different than above:

Name: _____
Address: _____
City: _____ St. _____ Zip _____

Account Code (Leave Blank if Unknown)	**Description**	**Total**

Attach invoices and use a separate form for each payee. Return to the Foundation Office, A-208.

Please note: Only expenses approved

Subtotal	$0.00
Tax	
Misc.	
Bal. Due	**$0.00**