CLUB SIGNATURE FORM

Cosumnes River College

A hard-copy with original signatures must be submitted to the SLLC.

Club Name: _____

This is to certify that the persons named herein have been authorized to sign requisitions on the funds of this account.

_____ _____

President's Name ***President's Signature*** **Date**

_____ _____

Treasurer's Name ***Treasurer's Signature*** **Date**

_____ _____

Advisor's Name ***Advisor's Signature*** **Date**

_____ _____

Co-Advisor's Name ***Co-Advisor's Signature*** **Date**

(If applicable)

No signatures other than the above are recognized on requisitions. This is for the club's protection. The original is sent to the Business Services at Cosumnes River College; a copy is filed with the Student Life and Leadership Center. Additionally, this form is used to verify the Advisor's signature on the club's fliers and posters.

Date Approved: _____ Submitted to Business Services on _____ SLLC Staff _____

Original - Business Services **Copy: Student Life and Leadership Center**

(Revised 8/1/17)