Murdoch University Veterinary Trust – 2012 Funding Application Form

This form should be used when applying for funds from the Murdoch University Veterinary Trust. Please complete the form and attach additional pages of information on project and expenditure detail if required. (Do not complete shaded areas**).** Return the completed form to Murdoch University Veterinary Trust (VCS 2.22) South St Murdoch, WA 6150. If approved, a copy of this form will be returned to you with the Authority to Spend portion completed and a scheduled reimbursement date. **You must return the form with proof of expenditure BEFORE the Scheduled Reimbursement date for funds to be disbursed.**

APPLICANT DETAILS—please complete			
Name:	Peter Irwin	Phone	Ext 2590
Title	Associate Professor in Small Animal Med	Email	p.irwin@murdoch.edu.au
Applicant Signature		Date	____/_____/_____
Dean's Signature		Date	____/_____/_____

FUNDING REQUEST—Please complete			
Project Title	Hill's Webinar	Amt Requested	$750

Project Description: (Please attach additional information, costs/quotes, how this will benefit animals or students etc).
Sponsorship of Web Seminar – Peter Irwin keynote speaker

Have funds already been received by the Vet Trust? **Yes**	Amt Received	**$750**	When?	2012
Who provided those funds?	Private Donor			

AUTHORITY TO SPEND (Completed by Veterinary Trust)				
Your Application has been	APPROVED ~~DECLINED~~		UP TO AMT:	**$750.00**

Funds are scheduled to be disbursed on ____/_____/_____. The following expenditure details and proof of payment (pd invoices &/or Finance 1 report) must be received **2 weeks prior** to the scheduled disbursement date.

EXPENDITURE DETAILS—Please complete		
Details of Charges	Finance 1 Acct OR (Bank Acct)	Amt (Excluding GST)
Discretionary Acct	01.26.21.0211.5.16020.03278	$750.00
		$
		$
Total		**$750.00**

Office Use Only: (Completed by Veterinary Trust)			
Application Received	____/_____/_____	Received by Signature	
Vet Trust Meeting	**9 October 2012**	Decision (Resolution #)	
Under $5000 & funds received	EO:	Trustee:	Trustee:
TRUST ACCOUNT	**~~Gift or~~ Sponsorship Acct no: 06.14.74.0468.5.25870.02840**		**Disbursement Amt: $750.00**
Applicant notified	____/_____/_____	Date Proof of Payment Received:	____/_____/_____
Scheduled Disbursement	July 2012	Sent to Office of Finance, Planning Report:	____/_____/_____