ID BUC\$ EQUIPMENT REQUEST FORM

CAMPUS EVENT PAYMENT OPTION FOR ETSU ORGANIZATIONS

Name of Department/C	organization:
Name of Event:	
Location of Event:	
Event Date(s):	Event Hours Open:
Has event / ID BUC\$ tr	ansaction site been reserved with the University Center Facility Reservationist?
Yes No	
Event contact and pers	son responsible for equipment:E#E#
Contact person informa	ation: cell or work #:
Requested by:	Date:e sign to accept responsibility of equipment
PAYMENT TO YOUR (Please provide below v a check requested?	ORGANIZATION which type of payment for funds collected from ID BUC\$. ETSU account transfer o
0	ETSU Account #
0	Check payable to
	Mailed to:
Will daily transaction re	eports be necessary? Yes No
A final summary of ID E	BUC\$ transactions will be processed for payment, if you need a copy, please check
Send copy to: (name &	address)

Important Notes:

- This form must be submitted at least five (5) days in advance of the event.
- Staffing of the transaction site is the responsibility of the sponsoring group.
- Reservation of the transaction site is the responsibility of the sponsoring group.
- Security for the Campus ID System equipment is the responsibility of the sponsoring group.
- Suitable locations for transaction services are limited due to technical restrictions.
- A current university ID is required for ID BUC\$ transactions.