



# INTER-RESIDENCE COUNCIL STATE UNIVERSITY OF NEW YORK AT GENESEO

MacVittie Union Rm 316 • Geneseo, NY 14454-1474  
Ph: 585-245-5878 • Fax: 585-245-5284

**FOR THE IRC's USE ONLY**  
 Reading Number: \_\_\_\_\_  
 Received: \_\_\_\_\_  
 Approved to the Agenda: \_\_\_\_\_

## HC Drawing Fund

Check Applicable Box/Boxes:

- Hall Council Program
- Hall Collaboration Program
- Fundraising Program\*
- RA/Hall Council Collaboration

Today's Date

\_\_\_/\_\_\_/\_\_\_

Event Date

\_\_\_/\_\_\_/\_\_\_



**Hall(s) Hosting the Event:**

\_\_\_\_\_  
\_\_\_\_\_

**Hall Council President(s):**

\_\_\_\_\_  
\_\_\_\_\_

**RA Collaborators\*\*** (If in collaboration with RA Staff):

\_\_\_\_\_  
\_\_\_\_\_

\*\* The reading presenter *must* explain how the RAs are contributing to the event.

**Event: Contact Person:**

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Reading Presenter:**

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name of Event: \_\_\_\_\_  
\_\_\_\_\_

Expected Attendance: \_\_\_\_\_ Total Cost of Event: \_\_\_\_\_

Amount Requested: \_\_\_\_\_ Percentage Requested: \_\_\_\_\_

Is there an admission charge? \_\_\_\_\_ If so, how much would it be before IRC funding? \_\_\_\_\_ After? \_\_\_\_\_

How is the remainder of your event being funded?  
\_\_\_\_\_

**Hall Council President Signature(s):**

(A signature of the HC president from each participating hall is required.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**RD/AC//ARD (circle one) Signature:**

\_\_\_\_\_

**Please attach a brief, typed rationale on what the event is, why you believe this event is needed, a full price breakdown on what the money for this event will be spent on, and any monetary contributions expected by the Hall Council(s) and RAs (if in collaboration with RA Staff).**

The person requesting money or a designated person named on this form must appear to speak at the IRC meeting. If this condition is not met, the reading cannot pass and the IRC Representatives will either table or fail the reading.

\* The hall must submit proof of the donation to the Director of Inter-Residence Affairs through donation receipt or donation confirmation within two weeks of the event. After two weeks the hall will go into bad financial standing until proof of the donation is received.

**Please Complete Page 2 of the Form**



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**In order for a reading to be approved to the agenda by the IRC Executive Board, this page must be completed and attached to the reading. This page will never be included in the agenda, and will only be used by the IRC Executive Board to ensure reimbursement for your event, pending approval at the IRC GA Meeting**

Name of Event: \_\_\_\_\_

Make Check Payable to: \_\_\_\_\_

Permanent Home Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_