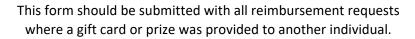
## **Prize & Gift Card Receipt Form**





	To Be Completed by Prize/Gift Card Receiver:	
Name of Receiver:		
Phone Number:		
Email:		
Item received (gift card value or prize ):		
Gift card #		
Date the prize/gift card was received:		
Recipient's Initials:	Date:	
Name of alub/DCH avacution	Representative	
Where is this money coming from?		
Trust Account Number:	Amount to be taken from trust (CAD \$):	
Trust Account Number: Grant Number:	Amount to be taken from trust (CAD \$):  Amount granted (if applicable):	
<del></del>	<del></del>	

Please return this form along with the cheque requisition form and any associated documents to the SFSS Student Centre (SUB 3115) for your reimbursement request to be processed.

If there are any questions, contact the SFSS Student Centre at studentcentre@sfss.ca