

The University of Connecticut
 Student Activities Banking Services (SABS)
 Student Organizations Fund

Printed Ticket Request & Sign-Out Form

(To be used in lieu of a roll of tickets.)

Organization Name: _____ Org. ID # _____

Contact Person: _____ Phone Number: _____

Name of Event: _____ Date(s) of Event: _____

Time(s) of Event: _____ Event Location: _____

----- Fill out top section only -----

TICKET INFORMATION: *(These tickets replace the need for writing manual receipts.)*

COLLECT DATA FROM ORGANIZATION:			COMPLETE PRIOR TO ISSUE:			
Quantity	Price	Type of Ticket : Resident, Guest, Member, Non-Member, (etc.)	FINAL ISSUE →	Ticket Numbers (# to #)	Color	

Do you want additional information included on the ticket? **Yes or No**

Additional Information: _____

Date of Ticket Request: ____/____/____

Date Tickets Are Needed By: ____/____/____

FOR OFFICE USE ONLY: DO NOT RELEASE YELLOW COPY OR TICKETS AT THIS TIME

Date tickets completed: ____/____/____ By: _____

SABS staff approval: _____

Date org. notified: ____/____/____ By: _____

TICKET SIGN OUT: RELEASE YELLOW COPY AND TICKETS AFTER ORG. SIGNS OFF

- I agree the above listed tickets have been received in satisfactory condition.
- I understand receipts must be written for any amount other than the pre-printed amount.
- **ALL** money collected must be deposited by ____/____/____
- **ALL** unsold tickets with stubs must be returned by ____/____/____

____/____/____
(Date)

(Signature of Organization Representative)