То:	Renee McDonald – Senior Associate Dean					
From:						
Department:						
Subject: Approva	Il for membership payment					
I ask for approval	of the following membership fees and dues payment and/or reimbursement.					
Name of Organiz	ation:					
Individual(s) Covered:						
Membership Period (dates):						
Amount:	\$					
Purpose:						
	nce is recommended, but not required. Please attach to the payment request form. Do not use d to pay for memberships.					
REQUESTED BY:						
Signature:						
Date:						
APPROVED:						
Peter Moore:						
Date:						

Link to SMU Policy Manual – <a href="http://smu.edu/policy/S13/member.htm">http://smu.edu/policy/S13/member.htm</a>

\*Please email this form as an attachment to Brooke Guelker (<a href="mailto:bguelker@mail.smu.edu">bguelker@mail.smu.edu</a>) for Dean Peter Moore's approval