



MISSISSIPPI STATE UNIVERSITY™

REQUEST FOR PAYMENT PROFESSIONAL ASSOCIATION DUES AND/OR FEES

This form must be completed and submitted to Procurement and Contracts with any request for the payment of association dues and/or fees. If the form is not properly completed and filed, the requesting individual will be liable for the re-payment of any funds expended by the University for the payment of such dues and/or fees.

The Attorney General of the State of Mississippi has determined that there are occasions where it is acceptable for the state to pay association dues and/or fees in the name of employees. The Attorney General opinions say such expenses are allowed if the University makes the following findings:

- That the professional association dues/fees are reasonable and necessary to the performance of the employee's duties.
- That the membership must accrue to the benefit of the public entity, and any benefit to the individual must be merely incidental.

Requesting Individual: _____
(Name of employee in whose name the dues or fees are being paid)

Department: _____

Association: _____

Description of Charge: _____

Amount of Charge: _____

Date of Request: _____

I certify that the charges listed herein follow the guidelines listed above:

Signature of Requesting Individual (Employee)

Date

Signature of Approving Department Head, VP, or Dean

Date