**Budget Appeal   
Affidavit – Personal Expenses**

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| 1. **Student Information** | | | | | | | |
| **Student Name:** |  | | **7-digit NAU ID Number:** | | |  | |
| **Phone:** |  | | **NAU Email:** | | |  | |
| **B. Personal Expenses** | | | | | | | |
| **Detailed Description of Personal Expense** | | **Vendor / Business Name** | | | **Date Purchased** | | **Expense Amount** |
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| **Total Personal Expenses** | | | | | | |  |
| **D. Agreement and Understanding** | | | | | | | |
| By signing below, I acknowledge that I have read and understood all the information outlined in this form. I attest that all information that I am providing is true and accurate. I acknowledge that I understand that only expenses incurred by me, as the student, are considered for the appeal process.  **Signature must be hand-written, typed or electronic signatures will not be accepted.** | | | | | | | |
| **Typed – Student First and Last Name** | | | |  | | | |
| **Student Signature** | | | |  | | | |
| **Date** | | | |  | | | |