UD CLUB SPORTS REQUEST FOR REIMBURSEMENT

Club Sport:	Account	Code: STGP 912
Amount of Reimbursement: \$		(filled in by Admin.)
Person to be Reimbursed:		
STUDENT ID #:		
United States Citizen? VES / NO		
If you are not a United State citizen, please see your C	lub Sports Office contact to obtain	n a UD-W8 form.
	OYEE?	REMINDER! This form MUST be signed by: ① "Reimbursee" (The individual requesting reimbursement) ② Treasurer of the Club (If the treasurer is requesting reimbursement, the President must sign)
Reason for requesting reimbursement(s):		
* Required for Travel/Gas Reimbursement:	Destination:	
	Date of Trip:	
		*Rate:
*Cents/mile determined by club. May n		
You must attach a map documenting th	e mileage between the	University and the traveled destination.

Payment Method:			
Back-up Documentation:	 <u>Original</u> receipt 	 <u>Original</u> Receipt Copy of the Credit card that was used 	 <u>Original</u> receipt Copy of the endorsed check OR a bank statement as proof that the check was deposited or cashed

Attach the required back-up documentation (indicated above) to this form and bring to 106 or 107 CSB. RECEIPTS MUST BE NO MORE THAN 30 DAYS OLD.

Your signature below certifies that the statement below is a true and accurate statement of expenses incurred in the proper execution of official club duties.

(1)

Signature, Reimbursee

Date

University use only

I certify that the above is a true and accurate statement of expenses incurred by this Club Sport in the proper execution of club duties, in accordance with University policy.

(2)

PRINT, Name of Treasurer

Signature, Treasurer

Date

Office use only