



Request for Reimbursement

Use this form for reimbursements ONLY; it is not intended for equipment purchases.

You are encouraged to use your procurement card.

Do not use to pay invoices. For pre-approved expenses only.

Request must be accompanied by original receipts and proof of payment.

DO NOT USE FOR THE FOLLOWING EXPENSES. FOR THESE EXPENSES USE THE FORM SPECIFIED:

Travel - Statement of Conference Expense

Mileage - Mileage Expense Claim Form

All Expenses under \$100 - Petty Cash Fund Reimbursement Request

Contract or Consulting Services - Authorization for Payment of Services (Independent Contractor Agreement)

Payable to: Requestor's Name **Requestor's Signature** **Date**

College **Division** **Administrator's Signature** **Date**

Extension **Social Security Number or ID** **Budget Officer's Signature** **Date**

List each receipt separately

Purchase Date	Item Description	Fund No.	Org No.	Acct No.	Program	Amount
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For Tuition Reimbursement:

Please submit final grading within 30 days of completion to your budget officer at your campus.

Total Approved for Payment:

Submit this form with original receipts to District A/P Dept.

Retain copies of your receipts until re-imbursed