

## Department of Ecology and Evolutionary Biology Expense Reimbursement Request Form

(Please complete all fields below and attach required documents, i.e. receipts)

Date: _____	Payee Name: _____
Account - Fund: _____	Employee ID: _____
PI/Lab: _____	Phone & Email: _____
Address: _____	

### Type of Expense:

SUPPLY - Please attach original purchase receipts		
Purchase Date: _____	Amount: _____	
What was this purchase for? _____		
Why was a Purchase Order Form not used? _____		
Was a University Corporate Card used?      Yes                  No		

BUSINESS/ENTERTAINMENT - Please attach itemized receipts and attendee list				
Event Date: _____	Amount: _____	Number of attendees: _____		
Host Name: _____	Event Location: _____			
Breakfast	Lunch	Dinner	AM Refreshment	PM Refreshment
Explain the purpose of the event in detail: _____				
Why did the event occur during a mealtime (breakfast, lunch, dinner)? _____				
If research fund is being used, how does the event benefit the project? _____				

MILEAGE				
*Event Purpose: _____				
*Please note the odometer mileage at both the beginning and end of your trip				
Date	Beginning Reading	Ending Reading	Total Miles	Destination and Purpose
Total Miles: _____ x \$0.51 per mile = _____				

I certify that the above is a true statement that the expenses claimed were incurred for official University business in accordance with the University policy on supply, entertainment, and/or reimbursement.

Payee Signature: \_\_\_\_\_

Faculty/P.I. Signature: \_\_\_\_\_