

**SOCIOLOGY**  
**REIMBURSEMENT REQUEST FORM**

Please use this form for the reimbursement of supplies and expenses (materials) only.  
DO NOT use this form for reimbursement of travel or entertainment (food) expenses.

**Payee Name:** \_\_\_\_\_

Request Date: \_\_\_\_\_

**Payee Email:** \_\_\_\_\_

Employee/Student ID: \_\_\_\_\_

**Detailed business purpose (REQUIRED):**

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Description of item(s) purchased (can be grouped by type, e.g. books, copies, etc.):	Cost
<b>Total amount to be reimbursed</b> (will automatically be calculated):	

Account Name/Fund Source: \_\_\_\_\_

Chartstring: \_\_\_\_\_

I certify that the above is a true statement, that the expenses claimed were incurred by me on official University business, and that I have attached original receipts for each expense, as required by University policy.

Payee signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department approval: \_\_\_\_\_ Date: \_\_\_\_\_

*For Administrative Office Use ONLY for Exceptional Approvals:*

Chair approval: \_\_\_\_\_ Date: \_\_\_\_\_

Dean approval: \_\_\_\_\_ Date: \_\_\_\_\_