In order to process your reimbursement, please supply the following information. Please note that the University does reserve the right to deny any reimbursement requests.

**Purchaser:**

**Location of Purchase:**

**Amount:**

**Funding Source for Reimbursement:**

**Description of Purchase\*:**

\*If your purchase was a dinner, meal, or gathering around food, please include the names of all attendees.

Signature of Fund Authority X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: