REIMBURSEMENT REQUEST FORM (version 7/30/12)

Use this form when you are requesting reimbursement for miscellaneous supplies and general expenses (books, office supplies, etc.)

This form should NOT be used: for Travel or Entertainment expenses; to request payment for services; or to place an order for an item.

The BSO has specific forms for the payment types above; contact us to determine which form should be used.

Request Date: ____________________________

Requestor Name: _______________________

Requestor Phone: _______________________

Requestor Email: _______________________

Payee (if not Requestor):

Payee Email (if not Requestor):

Payee Phone (if not Requestor):

Payment Address: _______________________

Type of Expense to be Reimbursed:

- Office Supplies
- Computer Supplies
- Subscriptions
- Memberships
- Copying Cost
- Books Purchased
- Other (Explain)

Business Purpose of Item(s) to be Reimbursed:

<table>
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<tr>
<th>Description of Item(s) Purchased</th>
<th>Total Cost</th>
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Total Amount to Reimburse (will be automatically calculated) $ ______-

Purchase Certification

UNAUTHORIZED PURCHASES
Responsibility - An individual who has not been delegated purchasing authority who makes an unauthorized purchase of goods or services shall be responsible for payment of the charges incurred.

At the discretion of the Chancellor or Laboratory Director:

1. The unauthorized individual shall be required to pay either the full amount whenever the purchase is found to cover unneeded items or items whose purchase would not otherwise be authorized and the transaction cannot be canceled, or the amount of any cancellation charges incurred when cancellation can be arranged.

2. The unauthorized individual shall be required to pay only the difference between the charges such individual incurred and those the University would be reasonably expected to have incurred whenever the purchase is otherwise found to have been proper.

Approval Signature: ___________________ Date: ___________________

Acct Name/Chartstring: ___________________