

**School of Art & Design**  
**Receipt Reimbursement Form**

**Instructions:** Please complete all fields. Receipt(s) must be taped to a blank 8.5" x 11" sheet of paper with your name written in the upper right-hand corner. Please include a description of the item(s) purchased if the receipt is not clear. **Faculty must initial all receipts for course related expenses.** Submit completed forms to Jennifer Wubbenhorst or David Constant in the A&D Finance Office (2025 Art & Arch).

**Please Note:** A&D Finance Office policy requires that receipts be submitted within 30 days of purchase.

**Recipient Information**

Name _____	UMID # _____
Address _____ _____ Street/P.O. Box _____	Course Number/Project Name _____
_____ City/State/Zip _____	Shortcode _____
Email: _____	Total Amount Claimed _____
	Was this a food purchase? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please complete event information section below.

**Event Information**

Event Name \_\_\_\_\_

Event Date \_\_\_\_\_

Reason for Food Purchase \_\_\_\_\_

**List ALL Attendees and UM Affiliation**

Name	UM Affiliation
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Faculty/Administrator Approval**

Name (Printed) \_\_\_\_\_

Signature \_\_\_\_\_