



INDIVIDUAL REIMBURSEMENT (10-351-4)

TEEX FORM INFORMATION AND INSTRUCTIONS

I. FORM NAME: INDIVIDUAL REIMBURSEMENT (10-351-4)

II. INTERNAL OWNER/POC:

<input type="checkbox"/>	Administrative
<input checked="" type="checkbox"/>	Financial
<input type="checkbox"/>	Internal Services
<input type="checkbox"/>	Operations

III. FORM PURPOSE:

The Individual Reimbursement form is used for individuals that are not TEEX employees to request reimbursement for their expenses when the individual is not receiving compensation for their time or service. This form is not to be used for payment or reimbursement to an Independent Contractor.

IV. FORM INSTRUCTIONS:

A. Field Completion:

1. **Name** - Name of individual
2. **Email** - E-mail address if applicable
3. **Federal Tax ID# or SSN**
4. **Mailing address**
5. **Telephone numbers** - Provide all numbers applicable
6. **Description** - Purpose of reimbursement
7. **Location** - Location of reimbursement
8. **Project/Task#** - Project/task to be paid from
9. **Detail** - Complete all areas that apply to reimbursement
10. **Summary** - Complete all areas that apply to reimbursement
11. **Signature & Date** - Signature of individual and date signed