

Cashier's Office
Business Expense Reimbursement Form

For business meal, hospitality, and supply expenses equal to or less than \$300

Complete this form, attach all receipts, obtain departmental approval, and present at the Cashier's Office located on the second floor of the Brown Office Building, 164 Angell Street. **Original receipts for all expenditures are required when using this form.** If receipts are missing, reimbursement must be processed through the Accounts Payable Office. Any expenditure that includes the purchase of alcoholic beverages must be processed through the Accounts Payable Office. **Maximum number of receipts that may accompany this form is eight (8).** Refer to accompanying instructions for policy details.

Name of Purchaser _____

Department _____ Box # _____

Individual Approved to Accept Reimbursement _____

Brown ID # of Individual Accepting Reimbursement (required) _____

Bring Brown ID with you to the Cashier's Office

Business Meals – Meal expenses incurred at a local restaurant.

One Event per Form! Please complete the section below and charge the expense to subcode 3210.

List all participants at the event _____

Location the event held _____

Date the event held _____

Business Purpose _____

10-Digit Account Number _____ Total Business Meals \$ _____

May not be used for meals charged to account # 2-31080

Food & Provisions - Reimbursement for food and/or provisions (not provided by Brown Dining or Faculty Club).

Please complete the section below and charge the expense to subcode 3230.

Items purchased _____

Business Purpose _____

Where and when will the purchased items be used _____

10-Digit Account Number _____ Total Food & Provisions \$ _____

Supplies – Reimbursement for office supplies.

Please complete the section below and charge the expense to subcode 3010.

Items purchased _____

Business Purpose _____

10-Digit Account Number _____ Total Supplies \$ _____

Books – Reimbursement for books.

Please complete the section below and charge the expense to subcode 3410.

Items purchased _____

Business Purpose _____

10-Digit Account Number _____ Total Books \$ _____

Signature of the Purchaser _____

Sign

Date

Authorized Approval _____

(May not be purchaser's signature)

Sign

Date

OSP Approval _____

(Required for 5-ledger expenditures)

Sign

Date

Procedures for Processing the Business Expense Immediate Reimbursement Form

Cash reimbursement using the *Cashier's Office Business Reimbursement Form* is for expenses that comply with University guidelines. Any expenses outside of guidelines must be processed through the Accounts Payable Office. Missing receipt affidavits are not accepted with this form. Total of all receipts/reimbursement request is equal to or less than \$300.

- The *Cashier's Office Business Expense Reimbursement Form* is presented at the Cashier's Office.
- The Purchaser may present the form for reimbursement or the Purchaser may permit another individual to present the form for reimbursement. If the individual presenting the form for reimbursement is not the Purchaser, that individual must be identified on the reimbursement form.
- Cashier requests the Brown ID of the individual who is at the Cashier's Office to receive the reimbursement and ensures the ID matches the name of the individual on the reimbursement form.
- Cashier reviews form for an authorized signature and, if a 5-ledger expenditure, an OSP signature.
- **All receipts are taped to an 8 ½ x 11 piece of paper.**
- The Cashier checks the following:

Business Meals

- All six lines are complete and the information is reasonable when compared to the receipt.
- The amount is equal to or less than \$300.
- **The amount requested is the same as the amount on the receipt. NO EXCEPTIONS**
- *May not be used for meals charged to account number 2-31080.*
- **Reimbursement Guidelines for Meals**
Expenditures in excess of these guidelines must be processed through the Accounts Payable Office.

Breakfast	\$25/pp
Lunch	\$25/pp
Dinner	\$60/pp

Food & Provisions, Supplies, and Books

- All information lines are complete and the information is reasonable when compared to the receipts.
- **The amount requested agrees with the receipt(s) total. NO EXCEPTIONS**

Reminder for Sponsored Project Reimbursements

Expenses charged to a 5-ledger account are first reviewed and approved by the Office of Sponsored Projects. A signature from OSP must appear on the form. Ensure the business purpose justifying sponsored project expenditures includes:

- How does the cost/charge provide a direct benefit to the purpose or object of the project; i.e. what is the benefit derived by the project as a result of cost being directly charged to the project?
- How will the proposed cost/charge be accurately documented and assigned to the project with a high degree of accuracy; i.e. can it meet the definition of a direct cost?
- The cost category, e.g. supplies or books, may imply that the items are being used for administrative or instruction purposes. How will these items be used to meet the technical needs of the project and what is their relevance to the methods used in conducting the project?
- Because all projects require a certain amount of office supplies, how will the proposed cost/charge differ from the standard level of support expected for all projects?

