## **Request for Reimbursement Form**

- 1. Attach all eligible receipts. Receipts must be itemized <u>and</u> show payment received. This may require two receipts for one event (e.g. restaurant bill itemizing food items ordered & the credit card receipt showing payment). Make copies of all receipts for your records.
- 2. Reimbursements for food must be accompanied by: time, date, and place of event, business purpose of event, and a list of attendees and their affiliation to event.
- 3. This form is not to be used for travel expenses. Please use the Post-Travel Information Form for travel reimbursements.

		Today's Date:
Print Name:		Signature:
Email:		OSU ID Number:
Home Address:		
Items Purchased:		
Business Purpose o	f Purchase:	
Euradia a Course for	Develope	
Funding Source for	Purchase:	
	ct	(project number) *
Investigator on the prior to form submi	research project), you must ssion.	he funding source (e.g. you are not the Principal obtain the following approval signature for this purchase ne funding source listed above, of which I have
Print Name	Signature	Date
*Submit form and	all supporting documenta	ition to Jacob Decot.
OFFICE USE		
ORG PROJECT	FUND PROGRAM	ACCOUNT USER REF

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