## Student Life

<b>Student Organization Reimbursement Forn</b>	Student	Organization	Reimbursement	Form
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Please completely and legibly fill out the form.

Completed forms should be turned into the Student Life Center within 2 business days of purchase.

Printed I	Name			
Student	ID Number			
Mailing	Address (City, State, Zip)			
Phone N	umber			
Email Ac	ldress			
Organiza	ation			
	of Reimbursement			
Annual/	Agency Account or One-Time-Funding			
Name of Event/Activity				
Date & Time of Event				
	of Event			
Total Re	imbursement Request			
	cklist must be completed before your reimbursement is processed. Mark NA for items that do not apply to your reimbursement. Please attach everything to this form with a paperclip.			
	Original itemized, detailed receipt(s) – Receipt includes a list of all purchased items and their cost			
	Copy of publicity (flyer, screenshot, etc.)			
	List of the names of those who were in attendance (on sperate sheet)			
	Completed gift prize or award form(s)			
	*Please Note* Any tangible gift(s) that total \$75 or more require Gift Prize or Award Form(s) for each individual receiving gifts All gift cards/certificates no matter the \$\$ amount require Gift Prize or Award Form(s)			
	Signed Sodexo waiver (if outside food totals over \$60)			
	If traveling, a copy of map to destination indicating total mileage – you will need to return to SLC to sign paperwork prior to submission			

I understand **sales tax is not reimbursed** in accordance with University policy. I understand tips are reimbursed for no more than 18% of the meal cost. All reimbursements must comply with University accounting policies, found on the Business and Finance webpage. By signing, I acknowledge the monies spent were for University use.

