

Personal Reimbursement Request

Instructions:

1. List expenditures by vendor. List in date of purchase date.
  2. Attach original itemized receipt(s) with proof of payment for each expenditure listed.
  3. Payments will be issued to claimant unless it is applied to an advance
  4. Send form directly to your Business Center within 60 days of oldest purchase
- Reference: FIS 407 Personal Reimbursement Policy <http://oregonstate.edu/fa/manuals/fis/407>

Type of Reimbursement (check one - do not combine funds)

- Personal   
  Dept. Petty Cash Refund  
 Employee   
  Student   
  Courtesy   
  Emeritus   
  Other: \_\_\_\_\_

Name: <i>(as it appears in Banner)</i>			OSU ID#:	Business Center:
Mailing Address: <i>(as it appears in Banner)</i>			Department/ Official Unit:	
City	State	Zip	Department Contact Name & Telephone Number:	

**Business Purpose** - required on all submissions (Provide who, what, where, and why of purchase of goods or services)

Purchase Date	Who: Vendor Name and Address	What: Item(s) Purchased	Amount
<input type="checkbox"/> Please apply reimbursement amount against an advance			

Index Code	Activity Code	Account Code	Amount	Index Code	Activity Code	Account Code	Amount

I CERTIFY THAT THE EXPENSE(S) ITEMIZED ABOVE WERE INCURRED IN THE PERFORMANCE OF MY OFFICIAL DUTIES AND THAT THE CHARGE(S) ARE THEREFORE JUST AND NO PART THEREOF HAS BEEN HERETOFORE PAID. I UNDERSTAND THAT MY REIMBURSEMENT OF THE EXPENSE(S) TRANSFERS OWNERSHIP OF THE GOODS FROM MYSELF TO THE UNIVERSITY.

Claimant's Signature\* \_\_\_\_\_ Date \_\_\_\_\_

Budget Authority's Signature\* \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

\* Signature should be original or per OSU eSignature policy [http://oregonstate.edu/fa/businessaffairs/sites/default/files/OSU\\_E-Sign\\_Policy.doc](http://oregonstate.edu/fa/businessaffairs/sites/default/files/OSU_E-Sign_Policy.doc)