

Reimbursement Summary Worksheet

Purpose of purchased item & description:

Requested Amount to be Reimbursed: _____

Use Tax to be added: YES / NO: _____

Account-Fund-Sub / Project Title: _____

Address to MAIL CHECK or DIRECT DEPOSIT (circle one) _____

Statement of Receipt:

I, certify that the expenses claimed were incurred by me on official University business on the dates shown, and that I have attached original receipts for each expense as required by University Policy.

Signature:

Title:

Date:
