

# Request For Personal Reimbursement

Pre-Travel Expenses \*

Other Expenses (non-travel)

DATE: \_\_\_\_\_

**MAKE CHECK PAYABLE TO:** \_\_\_\_\_  
 (Full Name Of Claimant):                      First Name                      Middle Name (or Initial)                      Last Name

**REMIT TO ADDRESS:** \_\_\_\_\_ **CSC AFFILIATION:** \_\_\_\_\_  
 (CURRENT HOME) \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**PURPOSE FOR EXPENSES INCURRED:** \_\_\_\_\_

Date Incurred	Vendor	Expense Description	Amount

\* Pre-Travel Expenses include Airfare, Conference/Event Registration Fees, Hotel Deposits, etc.

**CLAIMANT SIGNATURE:** \_\_\_\_\_ **TOTAL REIMBURSEMENT AMOUNT:** \_\_\_\_\_

**CHARGE TO:**

Project	Account Code	Distribution	
		Percent %	Amount \$

**APPROVED BY:** \_\_\_\_\_  
    Dean/Department Head (Print)                      Dean/Department Head (Sign)                      Date

Deliver completed form to the Computer Science Main Office  
 (Located in Engineering Building II, Room 3321)