



Travel Reimbursements/Advances: Use Travel Expense Reimbursement Form, sou.edu/studentlife/forms.html
Food or Item Reimbursements: Itemized receipts must accompany this form.
Food or Item Advances: Itemized receipts and list of attendees must be included
 Tape receipts on to a full sheet of paper



Description

Today's Date:		Funding Source	SFC \$ _____
Club/Organization Name:		SFC- Student Fee Funds	CBA \$ _____
Event Date:		CBA- Allocated Funds	Club \$ _____
Event Name:		Club- Club funds	
Description of item/services:	Total Amount: \$ _____		

Food Purchases (complete this section if reimbursement includes food purchases)

Purpose of Event:			
Location of Event:			
Beginning Time:		Ending Time:	
List event participants on back	I, the claimant, verify this reimbursement request does not include alcohol.		
	_____ Signature		

Payee Information

faculty	staff	student	direct bill	dept. p-Card	other
Name:			SOU ID # or Federal Tax ID #:		
Street Address:					
City, State, Zip:			Email Address:		
Phone Number:					

Signature

I certify that this claim is true, in accordance with the budget allowance of the organization, and correct and that no part has heretofore been claimed from any other source. For advances, I authorize SOU to place on my student account any portion of this advance for which I have not provided an accounting. I understand that advanced monies must be used solely for the reasons given and that any use of this advance for any purpose other than reasons given will affect my ability to receive future advances.

Claimant's Signature/DATE: _____ Printed Name: _____

Approvals (One signature is required from a Fund Approver (President, Treasurer, Advisor))

The claimant cannot sign as a fund approver for their own reimbursement.

Club/Org Approval Signature/DATE: _____ Printed Name: _____

OFFICE USE ONLY			
Budget Authority: _____			Date: _____
Index: _____	Amount: \$ _____	Account: _____	Notes: _____
Index: _____	Amount: \$ _____	Account#: _____	

List of Participants for Food Purchases

List all participants involved in the event for which food was purchased. You may, in lieu of completing this section, attach a copy of a roster or sign-in form used for the Event. If the event was open to the entire campus community or the public, please type "Event open to all SOU students" or "event open to the public."

SOU Participants

1.	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.

Guests

1.	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.