



Reimbursement Request Form

Department of Sociology

University of Washington
202 Savery Hall, Box 353340

General Information

IMPORTANT: Original receipts are required for all expense reimbursements. If you do not have receipt for items under \$200, you will need to sign a perjury statement. We cannot reimburse for items greater than \$200 without a receipt.

Due to the decreased operating hours of petty cash, we will use the check request for most reimbursements under \$ 3000.00. Please let us know if a faster reimbursement is requested. For reimbursements greater than \$3000.00, the invoice voucher and purchase order are required by the UW.

Name _____ EID _____
Date _____ SSN/ITIN _____

Residency/Citizenship Information

US Citizen Y N Permanent Resident Y N Nonresident Alien Y N

Country of Citizenship (if other than US) _____

Permanent Address _____
City _____ State _____ Zip Code _____

Office Address _____
City _____ State _____ Zip Code _____

Reimbursement Information

Budget # (if known) _____ Amount to be reimbursed _____

Budget Name (if known) _____ Vendor Name _____

Purpose of Purchase _____

<u>Category</u>	<u>Description</u>	<u>Amount</u>
Supplies	_____	_____
Meals	_____	_____
Travel	Pre-approved Y N	
	Air _____	_____
	Lodging _____	_____
	Other Travel _____	_____

Other Items/Comments _____

Notes:

- (1) Please attach a list of attendees and their affiliation for meal/dinner reimbursements.
- (2) Prior approval is necessary for charges to the Department's discretionary budget.
- (3) Alcohol can only be purchased on a discretionary budget.
- (4) Please obtain itemized receipts for meal/dinner reimbursements.

Signature _____

Date _____