

Student Organization Expense Reimbursement Form

For Student and Departmental Account Services Use ONLY:

AMOUNT REPRESENTATIVE'S INITIALS RECIPIENT'S SIGNATURE

Date _____

- Please make sure that your student organization's Finance Contact reviews and signs off on the form before it is submitted to the ASLC Treasurer.
- **All forms must be submitted to the ASLC Treasurer** in the drop box outside the ASLC office (Templeton 251). After the ASLC Treasurer verifies fund availability and information provided with the Director of Student Activities and Director of Student Leadership & Service and, the form will be forwarded to the Associate Dean of Students for final review, signature, and then forwarded to the Business Office for processing. *Your organization's Finance Contact, the ASLC Treasurer and the Associate Dean of Students must sign off all forms.*
- **In addition to a detailed receipt, under purpose of reimbursement you must include a complete description of why the expenditure was incurred on behalf of your student organization. Also, on the back on this form, you must include the number of and names of attendees at your event (a sign-in sheet is acceptable).**
- **Drivers will be reimbursed based on mileage. Mileage reimbursement descriptions should include, location of origination, destination, and calculated mileage distance as well as the date and purpose of the related trip. Mileage reimbursements are based on the IRS published mileage rate. Please use the back of this form if necessary.**
- Reimbursement request must be submitted within sixty (60) days of incurring the expense.
- Reimbursement checks (over \$50) will be available for pick up from Student and Departmental Account Services on Friday afternoons after 1pm.
- E-Check reimbursements will be deposited to the bank account you have recorded on WebAdvisor.
- Do not sign any performer contracts! All contracts must be reviewed, approved, and signed by the Director of Student Activities.
- Payments to independent contractors (i.e. honoraria, payments to individuals for services, performers, etc.) require a signed IRS Form W-9 and the appropriate contract, performance agreement, or invoice must be submitted with this request.
- Please consult Student Activities to arrange payments to students who perform or provide a service.
- **The student organization reimbursable expense policy and procedure can be found at <http://tinyurl.com/expense-reimbursement>.**
- Remember, reimbursement payments **will not** be issued unless all **original itemized** receipts, invoices, or other supporting documents are attached.

Payee (person getting reimbursed or paid) L&C ID Number _____ (only for L&C Students, Faculty, or Staff)

Payee Name (person getting reimbursed or paid) _____

Address _____

Purpose of reimbursement _____

Amount \$ _____ Organization Name _____

→ CERTIFICATION OF PAYEE (person getting reimbursed or paid) - REQUIRED ONLY FOR ALL REIMBURSEMENTS FOR L&C STUDENTS, FACULTY, OR STAFF

I hereby certify that all expenses on this reimbursement request were incurred for approved Lewis & Clark student organization purposes and have not been previously submitted. All expenditures were made in accordance with ASLC, Student Activities, and College policies.

Certification Signature _____

Authorizing Signatures

Organization Finance Contact _____

ASLC Treasurer _____

Assoc. Dean of Students _____

Account Numbers

300 - _____ - 2190 Debit \$ _____

300 - _____ - 2190 Debit \$ _____ (if multiple accounts are to be charged)

Payment Method (select one)

Reimbursements equal to or less than \$50 will be issued in cash at Student and Departmental Account Services.

Cash* _____ for reimbursements equal to or less than \$50

E-Check _____ bank information must be recorded on WebAdvisor for this option

Mail to Above _____ off-campus address only for independent contracts and vendors

Pick up check* _____ **Phone number** _____ **Email** _____

* Both cash and student check pick up are at Student and Departmental Account Services.

For Business Office Use ONLY:

BY _____ VOUCHER DATE _____ VOUCHER NUMBER _____

CASH APPROVAL _____ After obtaining approval for cash reimbursement, that this form to Student and Departmental Account Services for your cash.