The College of Architecture & Design Reimbursement Request Form

Personal Information	
Name: PeopleSoft ID:	Date on Receipt:
Reimbursement: \$ Classification (Check	one): Employee: University Student: Other
Reimbursement for: (check one)	
Hosted Business lunch/dinner with Guest Speaker/Visitor/Candidate/Other:	
Purchase of From (vendor name)	
Other	
Purpose and Benefit Statement:	
For reimbursement of business meals, please list names of guest(s) and employees, their institutional affiliations for groups of 10 or fewer. For larger groups, the name(s) of the guest(s) must be provided, together with the number of	
people attending and their general relationship to the university. For transactions that normally require gratuity, employees may be reimbursed for gratuity up to 20% of the transaction only.	
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5.	10.
Please complete, sign & submit the form with itemized re-	ceipt within 60 Cost Center:
days from the date of transaction. If the receipts are not le	egible copies,
proof of payment may be requested. 2. Tape receipts to the back of this form or on a separate letter.	er size paper. Chart field:
This is a legitimate university expense for which I was not previously reimbursed by University of Houston or another source	
Your Signature:	Date:
Supervisor/or Administrator Approval:	Date: