



# Student Activities Expense Reimbursement Form

Thurgood Marshall College

**Student Affairs**

**Payable To:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Student Contact:** \_\_\_\_\_

**Please check applicable:**

- Mail to payee address
- Pick-Up at Student Affairs Office
- Direct Deposit  
(see Jennifer Snow for more details)

Is Payee/Vendor a UC Employee: Yes  No

Is Payee/Vendor a CA Resident: Yes  No

Is Payee/Vendor a U.S. Citizen: Yes  No

**Student Organization:** \_\_\_\_\_

Name of Event	Date of Event	Index Number	Amount
<b>Total Amount</b>			<b>\$</b>

Student ID number (individual): A \_\_\_\_\_

*(Please provide your PID if this is your first request for reimbursement or your address has changed.)*

OR

Employer Identification Number (Business): \_\_\_\_\_

**Payments to all businesses and individuals require tax information . If the tax number is not provided the request will not be**

- PERSONAL REIMBURSEMENT** for approved purchases made by student.  
(Original receipts and copies required)
- CHECK REQUEST** to pay vendor for services.  
(Requests for payment must be submitted **at least 2 weeks** in advance)
- PURCHASE ORDER** to process a vendor invoice submitted for payment.  
(Invoice Required)

All expenses on this form were incurred by me while performing Thurgood Marshall College business. I have completed and attached the Student Activities Program Evaluation Form.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Approval: (Authorized signer other than payee)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\* Request from **TMSC projects/operations funds** must also be signed by the TMSC Vice Chair, Finance.

Vice Chair, Finance: \_\_\_\_\_ Date: \_\_\_\_\_