

# EPSILON CHI CHAPTER

## DIRECTOR REIMBURSEMENT REQUEST



Updated January 20, 2014

**Instructions.** Please fill out the following form completely. Print clearly in blue or black ink only. Attach all original receipts to the back of this form. Submit your request to the EY Center for Careers in Juniper Hall 2224. Allow approximately two weeks for your request to be processed.

### CONTACT INFO

Your first name and initial	Last name
Home address (number and street)	Apt. no.
City, town or post office, state, and ZIP code	

### EXPENSES

Date	Event	Description	Amount	Sponsorships		Treasurer Use Only
				Sponsored (Y/N)	Email Invoice To	Invoice No.
1			\$			
2						
3						
4						
5						
Total			\$	Issued Check No.		

### SIGN HERE

I declare that the executive overseeing the above event(s) approved each expense and to the best of my knowledge and belief, the information on this form is true, correct, and complete.

Your signature	Date	Your title	Daytime phone number
Executive's name		Executive's title	

### FACULTY ADVISOR AND CONTROLLER USE ONLY

Controller's name	Controller's signature	Date
Faculty advisor's name	Faculty advisor's signature	Date