

CLEMSON[®]

AUTOMOTIVE ENGINEERING

Request for Reimbursement

Other than travel expenses

****Receipts must be attached****

Part I. Expense Details

Date of Expenditure _____

Person to receive reimbursement _____

*Students Only – CUID Number (Required) _____

Amount to be reimbursed _____

Vendor/Supplier _____

Project to be charged _____

Reason for Reimbursement _____

Part II. Attendees

To be completed if the expense was for an event or meal

Non CU Attendees	Affiliation
_____	_____
_____	_____
_____	_____
_____	_____

CU Attendees

Part III. Signatures

Requester's Signature _____ Date _____

REQUIRED

Project (Fund) Approval _____ Date _____

REQUIRED ONLY IF DIFFERENT THAN THE REQUESTER

*Note: Requesters cannot approve reimbursements on their own project
Example: If you are requesting a reimbursement funded by a grant or foundation of which you are the PI. In this case, 2nd level approval is required (usually the Department Chair)*

2nd Level Approval _____ Date _____

REQUIRED ONLY IF REQUESTER AND PROJECT APPROVAL ARE THE SAME