



Student Purchase Request / Non-Travel Reimbursement Request

Purchase Request

Reimbursement

Name:		CUID:	
Email Address:			
Vendor:		Amount:	
Items/Services:			
Justification: How will it be used, how will it benefit? If an event, date?			
Expected Funding Source:			

Reimbursement Information (Required for Reimbursements)

Are you signed up for TigerPay (Zelle)?	Yes	No
If not, do you want to sign up or receive a check mailed to the mailing address below?	Sign Up	Mail Check
Current Mailing Address: (Required to receive a check)		

Signatures (Required for Reimbursements):

I certify that the above expenditures were made by me for official use only, and that claim for reimbursement has not been made.

Requestor: _____ **Date:** _____

Fund Approval: _____ **Date:** _____