



REIMBURSEMENT REQUEST FOR MEALS

Department of Political Science, Box 353530
University of Washington

IMPORTANT: Original ITEMIZED receipts are required for all reimbursements. If you do not have a receipt you must complete, sign and attach a *Perjury Statement*. Failure to follow these guidelines will result in delay of reimbursement.

Date _____

Name _____
(person to be reimbursed)

Email/
Phone # _____

Amount _____

Budget # _____

Amount _____

Budget # _____

Vendor/Place of Purchase _____

Purpose/Event _____

Please list attendees & university or company affiliation for each:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

If alcohol was purchased it can only be reimbursed by a 64-xxxx budget; please provide number below if applicable. Mark alcoholic beverages on receipt (do not highlight items).

Was alcohol purchased? ___ Yes ___ No Budget # 64- _____

\$ _____

Signature _____

**Program
Approval** _____

Submit form to: *Ann Buscherfeld, PoliSci, GWN 101*

revised 4/19