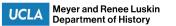
PO	#	11	30



## **REIMBURSEMENT REQUEST FORM:** Non-Travel and Non-Entertainment

Name	:	University ID Number:			
Title:		Currently Employed? (For Grad Student Only )	nly) Yes No		
Email	Address:	Purchased Date:			
Fundi	ng Source if known:				
	ng Address:				
Purpo	se of the Expense (enter a <u>detailed</u> description of how a	and where the item will be used):			
		ursable Expenses			
×	<ul> <li>Permission/ Rights for Images</li> <li>*Submit a business justification and invoice for direct payment.</li> </ul>				
×	<ul> <li>Service (Proofreading, Computer Repairs, and any other services performed by an individual/consultant)</li> <li>*Submit invoice and a business justification for direct payment.</li> </ul>				
×	<ul> <li>Computer Hardware/ Printer</li> <li>*Contact History Department Computer Resource Center to purchase equipment from UCLA vendors.</li> </ul>				
×	Hiring Students *Contact Personnel Coordinator.				
		sed For Research	÷		
	*ITEMIZED RECEIPT WITH PROOF OF PAYMENT IS	REQUIRED.	Amount		
	Books				
	Office Supplies				
	Computing Supplies				
	Copying Services				
	Maushaushin East				
	Membership Fees				
	Other				
		TOTAL COST:			

I certify that the information on this form is accurate to the best of my knowledge, and that I will not claim reimbursement from any other source for these expenses.

Requester Signature:

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

PLEASE ATTACH LOOSE RECEIPTS IN CHRONOLOGICAL ORDER BY CATEGORY TO 8 ½" X 11" PIECE OF PAPER WITH TAPE – DO *NOT* STAPLE.