



Reimbursement Form

*Digital copies may be turned in by email, include this form saved as a pdf, along with itemized receipts, to cepotts@uncg.edu

Please print out this Student Reimbursement Form and complete the fields below! An asterisk (*) indicates a required field. *If the instructions below are not followed, your reimbursement will **not be processed**.*

Once complete, attach your **ORIGINAL** receipt- copies will not be accepted- using **tape** on the back in order of date (**PLEASE DO NOT STAPLE YOUR RECEIPTS!**) Return this form to the front desk in the Campus Activities & Programs Office (office is located on the 3rd floor of the Elliott University Center).

*Name:	*UNCG ID Number:
--------	------------------

*Address (MUST Include the City, State, and Zip Code):
--

--

*Email Address:

*Organization/Group Name:

Event Name:

Event Date:

Event Location:

If Food-Related, Number of Attendees (NEW! You are now required to attach a list of all who participated in the event if it is food-related):

Total Amount Requested for Reimbursement: \$____.____

*Which account? ____ SGA Allocations ____ Student Group Funds *If you are requesting reimbursement from your student group's funds and have more than one account, please specify the account you would like to use below:

*Select One: ____ U.S. Citizen ____ Legal Permanent Resident (attach copy of I-551) ____ Non-Res Alien (attach form NRA001 w/supporting documentation)

NO STAPLES

**Use *TAPE ONLY* to secure your ITEMIZED receipt(s) in
this box.**

**If you have multiple receipts, please attach them in
date order.**

**You *MUST* include a detailed description of each
receipt.**