



Treasury Approval



Financial Office

Office of The
Tufts Community Union Treasury
GENERAL REIMBURSEMENT FORM

This form is to reimburse individuals for past purchases. This form must be turned in within 30 days of the expenditure with **ORIGINAL, ITEMIZED RECEIPTS** for every purchase listed below. Any forms accompanied by invalid documentation — such as invoices, order forms, or copies of receipts — will not be processed. **No organization will be reimbursed for the state sales tax paid on expenses (except for food).**

Reimbursement Payable To: _____ Tufts Student ID#: _____

Can this individual receive direct deposits from Tufts? (Circle one, leave blank if unsure): Yes/No

Permanent Address: _____ City, State, Zip Code: _____

Local Address: _____ City, State, Zip Code: _____

Primary Phone: (____) ____ - ____ Primary E-Mail: _____

Organization Name: _____ DeptID:A901_____

<u>Description</u>	<u>Amount</u>
a. _____	_____
b. _____	_____
c. _____	_____
d. _____	_____
e. _____	_____
TOTAL: _____	

Event Name and/Budget Line Item Purchased:

Organization Signatory Name (Please Print): _____

Organization Signatory Signature (Please Sign): _____

Date: _____

SIGNATORIES MAY NOT AUTHORIZE THEIR OWN REIMBURSEMENTS