



Reimbursement Form (UW Employee)

Date Submitted: _____

Name / Payee	Department	Phone #	Email
Project Title		Purpose (or reason for expenditures):	
Direct deposit is the default reimbursement method unless otherwise noted:			

Please itemize expenses below. If any expense is for hosted meals, please include a list of all people who attended.

[illegible]

Please save completed form with your receipt(s) as a single PDF file. Send the PDF to the Simpson Center Administrative Coordinator at schadmin@uw.edu.

Office Use Only: Reimbursement Authorization			
Budget		Amount Approved	
Project	Task	Option	
Notes			
Approved By (signature):		Date:	