ENGINEERING REIMBURSEMENT REQUEST FORM

DATE:_____   UCD EMPLOYEE: Yes   No

EMPLOYEE ID:_____

MAKE CHECK PAYABLE TO:

NOTE: Employees to make sure they're enrolled to have direct deposit (http://accounting.ucdavis.edu/directdep.cfm)

NAME:_____   DEPARTMENT:_____

ADDRESS:_____   DEPARTMENT CONTACT NAME:_____

CITY:_____   CONTACT PHONE NO.:_____

STATE: _____   ZIP: _____   CONTACT E-MAIL: _____

ACCOUNT(S) TO BE CHARGED: ACCOUNT   AMOUNT

_____   _____

_____   _____

_____   _____

PI APPROVAL: _____   ACCOUNT MANAGER APPROVAL: _____

EXPLANATION AND BUSINESS PURPOSE FOR ITEMS PURCHASED:

********ORIGINAL RECEIPTS REQUIRED FOR ALL REIMBURSEMENTS********

QUANTITY	ITEM DESCRIPTION	AMOUNT
	TOTAL	

*****$500 PER DAY MAXIMUM REIMBURSEMENT*****

For office use only: Dafis Doc No. 01-_____ Date: _____ Initials:_____