ENGINEERING REIMBURSEMENT REQUEST FORM

DATE:	UCD EMPLOYEE: Yes No EMPLOYEE ID:			
MAKE CHECK PAYABLE TO: NOTE: Employees to make sure they're enro	d to have direct deposit (<u>http://accounting.ucdavis.edu/directdep</u>	<u>ə.cfm</u>)		
NAME:	DEPARTMENT:			
ADDRESS:	DEPARTMENT CONTACT NAME:	DEPARTMENT CONTACT NAME:		
CITY:	CONTACT PHONE NO.:			
STATE: ZIP:	CONTACT E-MAIL:	CONTACT E-MAIL:		
ACCOUNT(S) TO BE CHARGED: AC	DUNT 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:
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