

UD SPORT CLUBS REQUEST FOR REIMBURSEMENT

Sport Club _____ Account Code _____

Amount of Reimbursement \$ _____ . _____

Person to be reimbursed: _____

* SSN: _____ - _____ - _____ United States Citizen? YES NO

If you are not a United State citizen, you are required to submit a UD-W8 form. This form is for reimbursements/expenditures authorization for non-U.S. citizens and is a required form for reimbursements paid through University of Delaware. To get a UD-W8 form, go to the Office of Foreign Students website: <http://www.udel.edu/ofs/>. Select the forms tab, item #24.

ARE YOU A UNIVERSITY OF DELAWARE EMPLOYEE? YES NO

Complete mailing address: _____

Purpose of expenditure(s): _____

* Required for travel reimbursemen: _____ * Where: _____
* When: _____ * What Event _____

Attach receipts to this form and bring to 106 or 107 CSB. **RECEIPTS MUST BE NO OLDER THAN 30 DAYS.**

Your signature below certifies that the statement below is a true and accurate statement of expenses incurred in the proper execution of official club duties.

I certify that the attached is a true and accurate statement of expenses incurred in the proper execution of official club duties, in accordance with University policy.

Reimbursee's signature _____ Date ____/____/____

(If applicable) Employee ID# _____

Club officer's signature _____ Date ____/____/____

Office only:

Approved Signature: _____ Date ____/____/____

* Required for reimbursement.
If you do not want to disclose this information on this form, provide a contact phone number so we can call you for the information: _____