

FINANCIAL CLUSTER MISC. (SUPPLIES) REIMB. REQUEST

03/27/18

Please submit reimbursement request electronically via [BearBuy's Payment Request Form](#) or via [ERSO's intranet system](#).
Please contact financialcluster@me.berkeley.edu for submission instructions.

This form is for the reimbursement of **miscellaneous supplies and expenses (materials) only**. Please use the Travel or Entertainment (Meal) forms (<http://me.berkeley.edu/services/financial-services>) for reimbursement of transportation and food related expenses.

A *bona fide* campus business purpose must be provided. Itemized receipts required for **ALL** expenses regardless of the amount. Please include receipts showing method of payment (i.e. Visa + last 4 digits of the card). **Name on receipts must match payee's name**. Kindly redact **personal** information (home address, cell phone #, account numbers, etc)

Please select one: ME Dept Jacobs Institute/ME NE Dept

Lab Supplies Office Supplies Computer Supplies Equipment Software Services Furniture Other

**Detailed
Business Purpose
(Required)**

Vendor Name	Purchase Date	Description/Reason for Purchase - For book orders, please provide title(s) -	Total Cost

Total Amount To Reimburse:

I hereby certify that the above is a true statement, that the expenses claimed were incurred by me on official University business on the dates shown, and that I have attached original, itemized receipts as required by Departmental and University policy.

Payee Name (Print): _____ EID or SID #: _____
Last, First, Middle

Payee's Signature: _____ Date (mm/dd/yy): _____

E-Mail Address: _____ Work Phone: _____

Department Approval (Required)

Approver Name (Print): _____ Approval Signature & Date: _____

Additional Approval (IF applicable)

Approver Name & Title: _____ Approval Signature & Date: _____

Account	Fund	Org ID	Program	Project	Flexfield	Amount