



Spring Hill College
Reimbursement Form

RK # _____

Name: _____

Date: _____

Department: _____

Position: _____

Date and Store/Service : _____

Business Purpose: _____

Requirements:

Note: The Business Office must receive a completed Reimbursement Form within 10 days after the completion of the purchase.

1. The following documentation is required for all types of expense reporting or reimbursement requests:

- ❖ Detailed original receipt or invoice showing total cost and proof of payment, if applicable
- ❖ Description of purchase and business purpose, if not perfectly clear based on the expense
- ❖ List of meal attendees
- ❖ Documentation must be translated to English, if necessary (this may be done by the employee)
- ❖ If receipts are in a foreign currency, please indicate the currency

2. The College will only reimburse the original payee with proof of payment. A department is unable to reimburse a vendor on behalf of the college without **Presidential** approval.

Account: _____ - _____ - _____ - _____

Amount: _____

Supervisor Approval: _____