



commerce
undergraduate
society

Reimbursement Request
UBC Commerce Undergraduate Society

This form is to be used for reimbursement requests for amounts under \$200.

Committee: _____ Date: _____

Initiator's Name: _____ Initiator's Position Title: _____

Initiator's Email Address: _____ Payable To: (Preferred Name) _____

Initiator's Student Number: _____ Payable To: (Legal Name) _____

Description of Expense		Amount
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
Total Amount		

Comments

Authorized Signatory Name (Service Chair or Finance Director)

Authorized Signatory Signature (Individual Named Above)

Analyst Use Only		
Name: _____		
Date: _____	Signature: _____	



CASH DISBURSEMENT

Amounts up to \$200

Disbursement will not be processed unless receipts/invoices/minutes are attached.

CLUB NAME: _____

DATE: _____

Detailed Description	Account Code	Amount

Account Code



Payable to: _____

Treasurer: _____
(please print legibly)

Approved by: _____
(treasurer's signature)

Received by: _____
(sign at cashier's desk)

FOR OFFICE USE ONLY	
Authorization: _____	
Date: _____	