



Club Reimbursement & Funding Request Form

Reimbursement Request

- All receipts are SIGNED & DATED by the person to be reimbursed, a club officer, and a club advisor.
- Original receipts are attached to a separate sheet of paper and attached to this form.

Total Amount: \$_____ Club Funds: \$_____ OSER Funds: \$_____

Event/purpose/items for reimbursement: _____

Club Funds Request (requesting a cash advance from your club account)

- Receipts for purchases or event must be RETURNED to OSER WITHIN 5 DAYS of receipt of funds.
- All receipts will be SIGNED & DATED by the person to be reimbursed, a club officer, and a club advisor.

Total Amount Requesting: \$_____

Event/purpose for Withdrawal: _____

**Allow two weeks for processing and the money to be deposited in your account. * All students must have a W-9 on file with the business office for reimbursement.*

Club Approval

Club Name: _____ Account #: _____

Person to be reimbursed/paid to: _____ ID#: _____

Address: _____ E-mail: _____

Advisor's Signature: _____ Date: _____

Club Officer's Signature: _____ Date: _____

Club Officer's Signature: _____ Date: _____

OSER USE ONLY

OSER Club Liaison: _____ Date Received: _____

Club Account Number: _____ Date Processed: _____