

Research Grant Request for Reimbursement

Print Form

Grant Holder: Date:

Pay to (if **NOT** grant holder): Name:

Address:

*Please be sure to complete a separate form for **EACH** travel claim with destination.
Please send the completed and signed form by email to research@kings.uwo.ca with all applicable receipts.
Credit and debit card receipts **MUST** be accompanied by the original cash register receipt in order to be reimbursed.*

Particulars (attach receipts **behind** this form):

<u>*Category</u>	<u>Date</u>	<u>Description</u>	<u>Amount (\$)</u>
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***Eligible Categories: Travel - Supplies/Materials - Service - Equipment - Contracts** **Total**

Choose One: ☐ Internal Select One: CY (current year) RNL ((renewal))

☐ External Account #: _____

Approved: _____ Date: _____

Grant Holder

_____ Date: _____

Vice-President Academic Dean

For Office Use:

Account Set: _____

Description: _____

HST: _____

Total Payment \$ _____