



## Research Grant Request for Reimbursement

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 print this completed form and send to the Academic Dean 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>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**\*Eligible Categories: Travel - Supplies/Materials - Service - Equipment - Contracts** **Total**

Choose One:  Internal      Circle One:           CY      or      RNL  
*(current year)*      *(renewal)*  
 External      Account #: \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  

**Grant Holder**

\_\_\_\_\_ Date: \_\_\_\_\_  

**Academic Dean**

**For Office Use:**

Rebate: _____	_____
Rebate: _____	_____
Rebate: _____	_____

Total Payment \$ \_\_\_\_\_