



# Reimbursement Form

Fill out the form below completely. Provide legible copies of all of the following: the award document, evidence of paid receipts/final travel voucher, copy of general ledger transaction, and copies of invoices to [lyn.jackson@ttu.edu](mailto:lyn.jackson@ttu.edu) or MS 5060 for reimbursement to school within 20 days of transaction or 10 days of FYE whichever comes first.

Date Awarded/Submitted \_\_\_\_\_

Award/Grant Name \_\_\_\_\_

Submitted by (Print) \_\_\_\_\_

Signature \_\_\_\_\_

Bus. Manager Signature \_\_\_\_\_

FOAP to reimburse \_\_\_\_\_

Document ID/GL Date \_\_\_\_\_

Director Signature of approval if over \$1,000 \_\_\_\_\_

Description of Purchase	Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total	_____

College Use Only		
Approval	Amount	Date
FOAP	_____	