

YEAGER REIMBURSEMENT REQUEST

MARSHALL
UNIVERSITY



SOCIETY OF
YEAGER
SCHOLARS™

NAME _____ MUID# _____

EMAIL _____

STREET ADDRESS *(This is the location where the reimbursement check will be mailed)*

CITY _____ STATE _____ ZIP _____

REIMBURSEMENT INFORMATION

DATE OF EVENT _____ LOCATION _____

PURPOSE _____

TOTAL AMOUNT REQUESTED _____

CHECKLIST

- I have original receipts.
 - *Charges without a receipt cannot be reimbursed.*
- All receipts are organized by date and taped to a piece of plain paper.
 - *More than one receipt can go on a sheet of paper, but the receipts must remain in date order.*
- All receipts are being submitted at one time.
 - *Multiple requests for reimbursement from one trip will not be accepted.*
- Only expenses associated with tuition, travel, meals, and lodging are requested.
 - *Clothing, health-related items, souvenirs, and entertainment-related expenses are not reimbursable.*
- This form and the receipts have been delivered to Kate McComas in Old Main 230.

PROCESS

Once the receipts and reimbursement request have been provided, they will be categorized and send to the MU Foundation for processing. You will receive an email with a link to approve a requisition. Follow the steps and link in the email. You are the first approver and must act for your reimbursement to advance. Add Dr. Hoey (hoey@marshall.edu) as the next approver, then click Submit at the bottom of the screen.

NOTES:

By signing below, I acknowledge that my reimbursement will take 4-6 weeks to process, and any failure to provide proper documentation in the required format will delay a reimbursement.

NAME _____

DATE _____