



CHEMICAL ENGINEERING
UC SANTA BARBARA

**General Reimbursement
Request Form**

Date:	_____	Grand Total:	_____
Name:	_____	Grant Name:	_____
Email:	_____	Fund Acct#:	_____
Phone:	_____	Faculty Name:	_____
		Faculty Approval:	_____

Signature or email approval if needed

Description: _____

Justification: _____

I certify that the above is a true statement, that the expenses claimed were incurred by me on official University business on the dates shown, and that I have attached original receipts for each expense as required by University policy. Furthermore, I attest that all proposed costs referenced are reasonable, allowable, and allocable to this particular project in accordance with the award terms and conditions. I confirm that I received all the items/services ordered and this reimbursement request form is complete. I give permission to the Chemical Engineering administrative staff to complete the online reimbursement on my behalf and submit it to Accounting to be processed.

Signature: _____

Print Name: _____

**Please complete, sign, obtain the faculty approval signature, attach original receipts
(in envelope or paper-clipped) and turn into the Chemical Engineering front desk for processing.**