COLLEGE OF DESIGN

Request for Reimbursement

This form must be used for reimbursements of expenditures made under emergency situations. All itemized receipts must be taped on all four sides on a separate sheet of paper. Do not use front and back. All receipts must be submitted for reimbursement within 30 days of the actual expenditure. Note: The dean's approval is required for all expenditures that occurred more than 30 days from the date of submission.

11	
Total Amount Reimbursed: # 876.2	4
Reimburse: Dang First	A. Bartelt
First	Middle Last
Employee ID: 349 44905	2
Street Address: 36 Meadow	lark lane
City, State & Zip Code: Belle	Mead NJ08502
Telephone Number: 908 874	1 5844
	elt@ncsu.edu
Explanation of Expenditure:	ine ficket for Tameka Allen to work
Purchased online airly	ine ficket for Tameka Allen to work
I certify the a	appropriateness of this reimbursement.
Requestor signature: Dave Built	Date: 4.4.09
I certify the availability o	of funds & appropriateness of this reimbursement.
I certify the availability of Project/Dept:	of funds & appropriateness of this reimbursement. Account:
Project/Dept: Signature of	Account:

1/2001