

2.00B Teams --- EXPENSE FORM

Please complete this form whenever you submit receipts and packing slips for reimbursement for purchases made for your team project.

Check One:

- Purchase for Reimbursement
- Internal Requisition
- Request for Purchase Order

Team Name: _____

Financial Officer Name: _____

Purchaser Name: _____

Date of Purchase: _____

Item Purchased: _____

Vendor: _____

Cost: _____

Please attach all receipts --- *originals required* --- AND any packing slips from deliveries to this form.