

University of Idaho College of Law

Reimbursement Request – Student Organization Accounts

Student Organization Name: _____

Club Treasurer: _____

Person to be Reimbursed: _____

Student ID: _____

Receipts (List and attach **ORIGINAL** copies):

| | Business | Amount |
|---|-----------------|---------------|
| 1 | _____ | \$ _____ |
| 2 | _____ | \$ _____ |
| 3 | _____ | \$ _____ |
| 4 | _____ | \$ _____ |
| 5 | _____ | \$ _____ |

Total Reimbursement\$ _____

Event & Reason for Reimbursement:

Name of Faculty/Staff Attendees (List UI Employees Only): *This is required if any attendees are UI employees.*

Other Comments:

