Lincoln University
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Purchasing Department
Phone: 484-365-5250

Reimbursement Form
(To Be Completed by Employee)

NOT FOR TRAVEL RELATED REIMBURSEMENTS

Before submitting your reimbursement request, please make sure you include all of the following items. Incomplete submissions will delay processing.

Request Information

Name:

Department:

Department Code:

Total Reimbursement Amount: $

Reimbursement Details & Supporting Receipts:

☐ 1. Brief description of what the reimbursement is for:

☐ 2. Receipts:

Attach all itemized receipts for the expenses you are requesting reimbursement for.

Recipient Signature: Date:

Supervisor Signature: Date: