KENT STATE UNIVERSITY SPORT CLUB
TRIP/EXPENSE REIMBURSEMENT REQUEST

CLUB NAME: ____________________________ MANAGER'S NAME: __________________________

TRIP DESTINATION (EXPENSE): _______________________________________________________

DEPART: ______ / _____ / _____ TIME: __________ RETURN: ______ / _____ / _____ TIME: __________

REIMBURSEE'S INFORMATION (Must be completed in full to receive reimbursement)

FULL NAME: ___________________________________ E-MAIL: __________________________
PHONE: ___________________________________ ALT. PHONE: __________________________
ADDRESS: ____________________________________________________________
CITY: __________________________________ STATE: _______ ZIP CODE: __________

**Is the person requesting the reimbursement a student employee of Kent State University? YES _____ NO _____

EXPENSES TO BE REIMBURSED (Attach and sign itemized receipts)

Travel (includes gas receipts, tolls, parking fees, etc.): __________
Lodging (Must be pre-approved by Assistant Director of Sport Clubs): __________
Other (Any unforeseen expenses; e.g. tournament fees, supplies, equipment, etc.): __________

TOTAL EXPENSES: __________

Special notes: ___________________________________________________________________

Manager Signature: ___________________________ Date: __________

KENT STATE UNIVERSITY SPORT CLUB
TRIP/EXPENSE REIMBURSEMENT REQUEST

CLUB NAME: ____________________________ MANAGER'S NAME: __________________________

TRIP DESTINATION (EXPENSE): _______________________________________________________

DEPART: ______ / _____ / _____ TIME: __________ RETURN: ______ / _____ / _____ TIME: __________

REIMBURSEE'S INFORMATION (Must be completed in full to receive reimbursement)

FULL NAME: ___________________________________ E-MAIL: __________________________
PHONE: ___________________________________ ALT. PHONE: __________________________
ADDRESS: ____________________________________________________________
CITY: __________________________________ STATE: _______ ZIP CODE: __________

**Is the person requesting the reimbursement a student employee of Kent State University? YES _____ NO _____

EXPENSES TO BE REIMBURSED (Attach and sign itemized receipts)

Travel (includes gas receipts, tolls, parking fees, etc.): __________
Lodging (Must be pre-approved by Assistant Director of Sport Clubs): __________
Other (Any unforeseen expenses; e.g. tournament fees, supplies, equipment, etc.): __________

TOTAL EXPENSES: __________

Special notes: ___________________________________________________________________

Manager Signature: ___________________________ Date: __________