

# BU **SPORT CLUB** REIMBURSEMENT FORM

Use this form if total reimbursement amount is over \$300.00. Otherwise, please fill out **Zelle Reimbursement Form**. Forms plus all itemized receipts must be turned in to the Campus Recreation office within 2 weeks of a trip or expense.

Date: \_\_\_\_\_ Submitted By: \_\_\_\_\_

Club: \_\_\_\_\_ Event name: \_\_\_\_\_

Event Date(s): \_\_\_\_\_ Event Location: \_\_\_\_\_

Name of person being reimbursed: \_\_\_\_\_

## Reimbursement for:

Equipment \$ \_\_\_\_\_

Food \$ \_\_\_\_\_

Gas (travel related) \$ \_\_\_\_\_

Gas (non-travel related) \$ \_\_\_\_\_

Parking Fees \$ \_\_\_\_\_

Lodging \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL \$** \_\_\_\_\_

## Person to be reimbursed:

Name: \_\_\_\_\_ BU ID#: \_\_\_\_\_

Cell phone number: \_\_\_\_\_ BU Email: \_\_\_\_\_

Please check the box indicating you have completed the following:

Filled out supplier form

Please email [BUClubSports@baylor.edu](mailto:BUClubSports@baylor.edu) for questions or to turn in forms and receipts.