MISCELLA	AINABLE CITIES INITIATIVE NEOUS REIMBURSEMENT REQUEST ITH RECEIPTS to the SCI Grants Administrator 204 Pacific Hall, 541-346-8591	Index(es):	Banner Doc #: Index(es): Date entered:		
Name and UO ID #: Mailing Address:			-		
Program or Project Name:		UO ID NUMBI HOME ADDRESS AF	UO ID NUMBER AND HOME ADDRESS ARE REQUIRED FOR REIMBURSEMENT.		
Approval (SCI Staff or SCI		Date			
LIST RECEIPTS IN ALPHA Receipt Date	ABETICAL ORDER ACCORDING TO VENDOI Vendor	R Description	Amount		

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10)			
At	Attach additional pages if necessary. TOTAL AMOUNT REQUESTED			

Attach additional pages if necessary.

NOTES REGARDING RECEIPTS:

- 1. Receipts are required for all requests.
- 2. Receipts for hosted meals MUST be itemized

4. When hosting meals for groups or guests, tips of up to 15% may be reimbursed when included on an itemized receipt.

- 3. Reimbursement for alcoholic beverages is not allowed.
- 5. Reimbursement for an item on contract will not be allowed.
- If you have questions contact the SCI Accountant, 204 Pacific Hall, 541-346-8591

	Commodity	Index	Fund	Orgn	Acct	Prog	Actv	Amount
JSE								
CE (
DFFIC								