



The Graduate Student Senate

Student Union; 2110 Hillside Rd., U-3008
Phone: (860) 486-3907 Fax: (860) 486-6739
E-mail: gss@huskymail.uconn.edu
Web site: www.gss.uconn.edu

Reimbursement Form

For Office Use Only:

Approved

Not Approved

Date Received: ____ / ____ / ____

Organization

____ / ____ / ____
Date of Senate Meeting Approved

Contact Person: _____

Phone: _____ email: _____

Name of Event: _____

Date(s) of Event: _____

PLEASE USE THE BACK OF THESE PAGES IF MORE SPACE IS NECESSARY

NOTE: YOUR ANSWERS TO THESE QUESTIONS WILL NOT AFFECT YOUR REIMBURSEMENT; THEY ARE FOR INFORMATIONAL PURPOSES ONLY.

How many people attended?

How many graduate students attended?

Would you hold the event again in the future?

How did you advertise the event?

Why was this event successful?

How would you improve your event?

Did you contact anyone that was particularly helpful?

Was the funding process confusing? If so, which part?

{Please see next page}

*Forms that are not filled out properly will be returned at the next senate meeting.
 Incomplete and improperly filled out forms will result in a delay in reimbursement.*

Please number your original receipts/contracts and circle the total amount of the request. You must turn in the original AND one copy of each receipt with this form for the Business Office’s records. Write the name of the person, business, or department the check should be to under “payee”.

Receipt #	Expense	Amount	Payee
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Please fill out the following table according to how *you* calculate the checks to be made out. For instance, if there are four receipts that total \$145.67 to be reimbursed to Joan McAllister, put them under check #1, their receipt #s (hypothetically 2, 6, 7, and 10) in the second column, \$145.67 in the third, and Joan McAllister in the fourth. This allows the Graduate Student Senate treasurer to check his/her calculations against yours.

Check #	Receipt #s from above	Total Amount	Payee
1			
2			
3			
4			

Payee 1- e-mail: _____ Phone: _____

Payee 2- e-mail: _____ Phone: _____

Payee 3- e-mail: _____ Phone: _____

Payee 4- e-mail: _____ Phone: _____

{Please see next page}

Please fill out this page by copying the expense description and the amount allocated from the approved budget in the first two columns. In the third column put the amount spent from each budget line as indicated by the receipts.

BUDGET

	<u>Expenses:</u>	<u>Allocated:</u>	<u>Spent:</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
	Total Expenses:	_____	_____
	<u>Revenues:</u>	<u>Allocated:</u>	<u>Collected:</u>
1.	_____	_____	_____
2.	_____	_____	_____
	Total Revenues:	_____	_____
	<u>Total Spent:</u>	_____	_____

Check Distribution:

- Checks are not available until at least two weeks after this form is submitted to the Senate Office.
- Checks will be first distributed at the Graduate Student Senate meeting following processing at the business office.
- If you do not attend this senate meeting then the checks must be picked up at the Graduate Student Senate Office in the Student Union.
- The payee will be notified once by phone and e-mail when the checks can be picked up.
- The payee can send someone else to pick up their check.
- Checks not picked up after 60 days will become void and a new check must be issued.
- Checks will not be mailed unless in extreme cases.