**Reimbursement Request Form**

Asian American Cultural Center at Yale University

**Person/Group to Reimbursement**:

**Transaction Date**:

**Reimbursement due**: $

**Event Title**: ­­­­­­

**Number of Attendees**\*:

***\*If fewer than 11 attendees, please write names***

***here:***

Group

***AACC Student Organization (please specify which organization****)*:

***Center Staff Team****:*

***Peer Liaison College(s)****:*

What did you purchase (provide as much information as possible)?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Below to be completed by AACC Pro-Staff (Director/Assistant Director)

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*Please attach flyer/email for event and all original/receipts**

**\*\*\*Be sure to ask for a transaction receipt (i.e. VISA 1234 or CASH $12.34)**

**and an itemized receipt (lists all purchases made)**