

Payment Request/Expense Reimbursement

- * All capital equipment and computers/laptop must be purchased directly through VHF. Reimbursement is prohibited.
- * Invoices and/or receipts must be attached to request.

Request Date	Project PI(if applicable)	IRB# (if applicable)
VHF account to be used	Payee	Amount Requested
Payee Mailing Address		
Description of Goods or Servic	es	
Justification for Expenditure		
Requestor Signature	Project Approver (if different than Requestor)	
VHF Office Use Only		
-	Funds/budget verified by:	Entered in A/P by: Date