

Request/Authorization for Payment/ Reimbursement

To request a payment/reimbursement, complete one form for each check to be issued. Enter budget codes (refer to the TSHA Chart of Accounts) for correct account coding. Enter Explanations and Amounts on the Expense line that best describes the expenditure. **Please note the name of the meeting, function, or event your expenses correspond with, as well as the date of the event.**

Document all expenses by stapling receipts/invoices to the back of this form. If no receipts exist, provide complete explanation for expense. Approval by a TSHA Officer is required. Send the completed form to the TSHA Officer who oversees your Committee or Task Force. TSHA checks are written on the 5th and the 20th of each month.

This Authorization is (check one): _____ prior to expense or _____ after expense.

MAKE CHECK PAYABLE TO:

Person submitting request: _____ Date _____

Address _____

City _____ State _____ Zip _____

Officer Section: _____

Name of Meeting/Function/Event and Date: _____

Reimbursement request must be submitted within 30 days of incurring the expense. Reimbursement requests must be submitted by June 1st of each fiscal year.

Code #	Expense Item	Explanation	Amount
	Gifts		
	Catering/Meetings		
	Contract Labor/Fees		
	Lodging (individual)		
	Meals (individual)		
	Travel		
	Registration/Dues		
	Internet		
	Postage		
	Printing		
	Supplies		
	Telephone/Fax		
	Miscellaneous		
		Total Amount for Check to be Issued	\$

<p>For Approving Officer Use Only: Approved for payment _____ Date _____</p>

<p>For TSHA Office Use Only: Date received _____ Date paid _____ Check# _____</p>
--