

UA DEPARTMENT OF PHARMACY PRACTICE & SCIENCE  
REIMBURSEMENT FORM

**\*\*Before submitting this document, please obtain approval from Account Supervisor/PI.\*\***

**CHECK HERE IF APPROVED**

<u>Personal Information</u>	<u>Billing Information</u>
<u>Today's Date:</u>  <u>Full Name:</u>  <u>Employee ID:</u>  <u>Travel Authorization</u> <u># (If applicable)</u>  Check here if you are <b>not</b> an employee/student worker	<u>Account #:</u>  <u>Sub-Account #:</u>  (If splitting) <u>Split with Account #:</u>  <u>Sub-Account #:</u>  <u>Percentage (%):</u>

<u>Additional Instructions/Notes</u>

<u>Items Purchased</u>
<p>You will need to provide receipts (please attach them in the email) that are dated and include the last four digits of the card the purchase was charged on. Please include a justified business purpose. This includes what was purchased, when, by who, where (which lab under and under which doctor if applicable), how it will be utilized and the cost. Purchases must be submitted for reimbursement within 90 days, or the purchase becomes taxable income on your part.</p> <p>If the reimbursement is a part of travel, your employee absence form must be signed by yourself and your supervisor. This can be submitted to <a href="mailto:Abigailmatzdorff@arizona.edu">Abigailmatzdorff@arizona.edu</a> You must also have a completed Travel Authorization Request. We will need the four digit number (space above to insert the number) to process any travel reimbursements.</p> <div style="margin-top: 20px;"><div>1.</div><div>2.</div><div>3.</div><div>4.</div></div>

Please email your request to [AbigailMatzdorff@arizona.edu](mailto:AbigailMatzdorff@arizona.edu) (Tucson Campus) or  
[ManuelMartinez@arizona.edu](mailto:ManuelMartinez@arizona.edu) (Phoenix Campus)

# UA DEPARTMENT OF PHARMACY PRACTICE & SCIENCE

## REIMBURSEMENT FORM

### **How to request a reimbursement:**

1. Ensure all purchases have been approved by the account supervisor or PI prior to purchasing

2. Fill out the Reimbursement Form as soon as you make the purchase, the form should be filled out completely and sent via email, along with copies of receipts.

3. Include a Justification/Business Purpose for the purchase. Per Arizona Constitution, Article 9, Section 7, public funds are to be expended only for public purposes. Requests with an incomplete Business Purpose will be returned for modification. Below is the link with assistance on how to write a business purpose statement.

<https://financialservices.arizona.edu/accounting/business-purpose>

4. A University account number is necessary for payment. This should be a 7 digit number and if there is a sub-account, that should also be included. Some accounts do not have sub-accounts. (Example: 1234567-D1905). The person who approved the purchase can tell you the account they would like you to use.

5. Send completed Reimbursement Form and receipts to Abbi Matzdorff [AbigailMatzdorff@arizona.edu](mailto:AbigailMatzdorff@arizona.edu) for the Tucson campus or Manny Martinez [ManuelMartinez@arizona.edu](mailto:ManuelMartinez@arizona.edu) for the Phoenix Campus.