



Tisch School of the Arts  
Office of Student Affairs  
726 Broadway, 2<sup>nd</sup> Floor  
New York, NY 10003

## REIMBURSEMENT FORM FOR CLUBS & ORGANIZATIONS

*Attach this form to any receipt that you submit for reimbursement or for club records.*

TODAY'S DATE: March 4, 2014

YOUR NAME: SHERLOCK HOLMES

YOUR EMAIL ADDRESS: s.holmes@gmail.co.uk

CLUB NAME: It's Elementary

EVENT FOR WHICH PURCHASE WAS MADE: "Watson"

NUMBER OF EVENT ATTENDEES (if applicable): 4

## SUBMIT COMPLETED FORM AND ATTACHED RECEIPT TO:

Caroline Wolfe Papocchia  
Tisch Office of Student Affairs  
726 Broadway, 2<sup>nd</sup> Floor



**NEW YORK UNIVERSITY**  
**STUDENT EXPENSE REIMBURSEMENT FORM**

(LAST REVISED DEC 2009)

## Form EXP2000S

**For Accounts Payable Use Only**

*This form is to be used by NYU students only to request reimbursement for university business expenses. NYU will not process requests for expenses that are deemed nonpermissible/nonreimbursable by the University.*

For guidance, refer to the *Business Expenses Policy and Expense Reimbursement Policy* of the University ([www.nyu.edu/financial.services/cdv/policies](http://www.nyu.edu/financial.services/cdv/policies)).

If reimbursement is for travel, attach Form EXP2000T (reimbursement request for each trip must be submitted on a separate Form EXP2000T).

If reimbursement is for meals during business meetings or events, attach Form EXP2000M. Otherwise, complete Box 11.

## **CASH REIMBURSEMENT.**

Mark box if total expenses are \$300.00 or less and you want reimbursement in cash. For cash reimbursement, take the form to the Office of the Bursar. *For location and office hours, please refer to the Office of the Bursar Website ([www.nyu.edu/bursar/location.hours](http://www.nyu.edu/bursar/location.hours)).*

**PAYEE INFORMATION**

1. PAYEE'S FULL NAME (FIRST NAME, MIDDLE INITIAL, LAST NAME)		For Accounts Payable Use Only
Sherlock Holmes		VENDOR NUMBER:
2. HOME ADDRESS		5. UNIVERSITY ID NUMBER:  N <u>  </u>
221B Baker Street London W1U 6RH UK		
3. ALTERNATE MAILING ADDRESS (IF APPLICABLE)		
4. DEPARTMENT TO BE CHARGED		6. CONTACT PERSON (IF OTHER THAN PAYEE) AND TEL. NUMBER
TSOA Student Affairs		Mercer Crenshaw 8-1913

**EXPENSE/ACCOUNT DETAILS**

10. TOTAL AMOUNT OF REIMBURSEMENT (IN WORDS)  
Thirteen dollars and thirty-seven cents

11. DESCRIPTION AND BUSINESS PURPOSE OF EXPENSE/S  
Craft supplies for an key scene for It's Elementary's production of "Watson"

**12. SIGNATURES/APPROVALS:** *I, the Payee, certify that the charges reported here are correct and that I am not claiming reimbursement from other sources for the same.*

SIGNATURE OF PAYEE <i>Sherlock Holmes</i>	EMAIL ADDRESS OF PAYEE s.holmes@gmail.co.uk	TEL. NUMBER 020 5555 5555	DATE 3/4/14
NAME OF APPROVER	SIGNATURE OF APPROVER	TEL. NUMBER	DATE
SIGNATURE OF PAYEE TO PICK UP PETTY CASH ( <i>To be signed in the presence of the teller at time of pick-up.</i> )			

NYU BOOK STORES  
726 BROADWAY  
NEW YORK, NY 10003  
212-998-4667  
WWW.BOOKSTORES.NYU.EDU

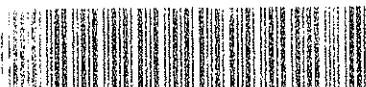
"Watson"

1.5 55193 1199 Sale

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\* TEXTBOOKS NON-TAXABLE \*  
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0511419027088 / 219		
TYPE UTILITY .50 X 700	1.99	
0716412517486 / 213		
25174 MAJOR ACCENT 4 PK BIG	4.65	
0716413010150 / 213		
10101 SHARPIE FINE BLACK 04	1.49	
0726383100988 / 213		
31008 PEN QZ RETRACTABLE XF	2.30	
1415952 / 212		
GRAPH PADS-3 SQ.6 PEN INCH	1.85	
Subtotal	12.28	
Total Tax	1.09	
<hr/>		
Total	13.37 *	
VERIFONE	13.37	

Account# 1155193  
Account#  
Authorization:  
Reference: 476622387/197223/0EBIT  
Control#: 1.5.55193.38931.8133



1.5.55193

10:47 08/28/13  
SUMMER COURSE MATERIALS ARE NOT RETURNABLE/FALL RETUR-  
NABLE THROUGH 9/17  
ALL RETURNS MUST BE IN NEW CONDITION/IN ORIGINAL PA-  
CKAGING  
• RECEIPT EBOOKS MAY BE RETURNED WITHIN 7 DAYS OF  
PURCHASE  
• NOT ACCESSED/REFERENCE STUDY AIDS, COURSEPACKS &  
DIGITAL & PRINT  
• NOT RETURNABLE, SCHOLAR'S DISC, CD, DVD & MP3  
• MAY BE RETURNED WITHIN 30 DAYS