Rutgers Alumni Association
Expense Reimbursement / Advance Form

Committee: _____Event:_____ Date of Event___/___/___
Date of Request: _____ Date check needed by:_____/____/_____
Requested by:_____ Payable to:_____
Mail Check to: _____
Address_____
City_____ State_____ Zip_____

RAA Account #	$$ Expense Amount $$	Description	
Total Amount $			

For Meeting Cost Reimbursement:

Committee: _____
people pre-registered _____ # people attended _____
Meeting minutes submitted ? (Y/N) _____ Item was budgeted? (Y/N) _____
Rutgers Alumni Card Discount applied ? (Y/N) _____

For Reimbursement, minutes / receipts MUST be attached and RAA Treasurer cc'd

Mail completed form & receipts to:
Rutgers Alumni Association
P.O. Box 11320, New Brunswick, NJ 08906

OR

Scan/ Email completed forms & receipts to:
Athena@rutgersalumni.org
jwoworldenterprise@yahoo.com