

The RGS General Expense Reimbursement Form (*non-travel*)

Name: _____ Mailing Address: _____

Business Purpose: _____

****Please submit expenses related to travel via *The RGS Travel Expense Reimbursement Form***

Date	Vendor/ Store Name	Description	Expense Category <i>(optional)</i>	Amount
TOTAL COST				

Choice of Reimbursement (please check one)

- Please issue me a check in the amount of the expenses I have indicated above.
- In lieu of expense reimbursement, I wish to claim my travel expenses as a contribution to The Respect Institute, Inc. Please send me an acknowledgement of this gift, in the amount indicated above, for my tax records. I understand that this contribution is tax-deductible to the fullest extent allowed by law.
- I would like to contribute \$_____ of my expenses as a donation and have the rest reimbursed.

Employee Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Note: ALL receipts must be submitted along with this form.