

SOFAC REIMBURSEMENT FORM

Please use the following to prepare your complete EXPENSE REIMBURSEMENT. If you need more than 12 reimbursed persons, please email SOFAC@missouristate.edu to get one with more reimbursed parties lines.

Please complete this form if you are seeking reimbursement for an expense incurred by an individual or organization. Reimbursement takes a minimum of 10 days, but could take up to 3 weeks.

This form should be submitted within ten (10) business days of an event's end date.

Organization Name:	Traditions Council
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Financial Officer Name:	Minnie Mouse	Fin. Officer Email:	mam1994@live.missouristate.edu
President Name:	Mickey Mouse	President Email:	mmouse@live.missouristate.edu
Advisor Name:	Victoria Culver	Advisor Email:	victoriaculver@missouristate.edu

EVENT INFORMATION: This section provides us information for the event for which you are requesting reimbursement.

Event Name:	Ultimate Mascot Challenge	Event Location:	Cedar Rapids, IA
Date (Begin):	2/15/2015	Date (End):	2/17/2015

REIMBURSED PARTIES: Complete one line for each party to receive reimbursement.

A reimbursed party is one that incurred the original expense (organization or individual). A Travel Expense Report should be completed and attached to this form for each party listed below. Please review "How to complete a Travel Expense Report in the Payment Manual for assistance.

		M#	Reimbursement Total
Name:	Traditions Council	1234567	\$ 359.38
Name:			
Name:			
Name:			
Name:			
Name:			
Name:			
Name:			
Name:			
Name:			
Reimbursement Total		\$	359.38
Amount Allocated		\$	2,100.00
Max Remaining			

PLEASE PRINT THIS FORM AND ATTACH TO FRONT OF ALL TRAVEL EXPENSE REPORTS AND SUPPORTING MATERIALS. TURN ENTIRE PACKET INTO THE OFFICE OF STUDENT ENGAGEMENT (PSU 101).

I have completed this form to the best of my ability and understand any mistakes in the information provided may result in a delay of reimbursement on behalf of SOFAC and Missouri State University. I further understand that any misrepresentation in these materials of the organization and/or event may result in the forfeiture of any allocated funds. It is also my understanding that it is the organization's responsibility to complete any necessary financial paperwork and meet all deadlines as outlined in the SOFAC Guidelines.

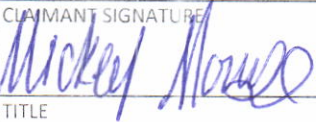
Name:	Mickey Mouse
Organization Title:	President

Signature

Date

Mickey Mouse

4/5/15

EMPLOYEE NAME (LAST, FIRST) Traditions Council				M# 1234567		FOR MONTH OF April 20 15						
SEND BY DIRECT DEPOSIT* YES ☐ NO ☒ SIGN UP HERE				DEPARTMENT NAME								
*Direct Deposit is available for University Chart of Accounts Only. Check will be issued for reimbursement from Foundation Accounts - Employee/Student Only												
ADDRESS 901 S. National Ave Springfield, MO 65897												
DESTINATION Cedar Rapids, IA				FINANCIAL SERVICES USE ONLY Verified by and date _____ TRAVEL REQUEST NUMBER _____ \$ _____ \$ _____ \$ _____ \$ _____								
BUSINESS PURPOSE (include list of people traveling) Ultimate Mascot Challenge												
Duck, Donald												
Ranger, Dale												
Ranger, Chip												
GRANT EXPENSES: Attach documentation of how this meets scope of project.												
DATE	FROM/TO	DEP. TIME	ARR. TIME	MILES	73000 BKFAST	73000 LUNCH	73000 DINNER	73001 HOTEL	73004 BUS/RR/AIR	LIST MISC. BELOW	TOTAL	
2/15/15	Cedar Rapids 2/15-2/17							134.38			\$134.38	
2/17/15										225	\$225.00	
											\$0.00	
											\$0.00	
											\$0.00	
											\$0.00	
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											\$0.00	
											\$0.00	
FORWARD FROM ADDITIONAL SHEETS →											\$0.00	
TOTALS OF ABOVE →					0	\$0.00	\$0.00	\$0.00	\$134.38	\$0.00	\$225.00	\$359.38
73002 TOTAL MILES →					0	AT _____ cents per mile					\$0.00	
					TOTAL REIMBURSABLE EXPENSE →					\$359.38		
EXPLANATION OF MISCELLANEOUS CHARGES												
DATE	EXPLANATION				\$	DATE	EXPLANATION				\$	
1/27/15	Ultimate Mascot Challenge Registration Bid				\$ 225.00							
I affirm the above claim is correct, that payment has been made from personal funds and that I have not been reimbursed. I further affirm that I have not received and will not receive from any other source whatsoever any payment or any partial payment except as provided by law.												
CLAIMANT SIGNATURE 					APPROVER PRINT NAME SIGNATURE							
TITLE President					TITLE				DATE APPROVED			



BY CHOICE HOTELS

Quality Inn at Collins (IA026)

5055 Rockwell Dr. NE
Cedar Rapids, IA 52402
(319) 393-8247
GM.IA026@choicetohotels.com

Account: 388307404

Date: 3/29/15

Room: 223 GROUP~

Arrival Date: 3/27/15

Departure Date: 3/29/15

Check In Time: 3/27/15 11:32 PM

Check Out Time: 3/29/15 7:37 AM

Rewards Program ID:

You were checked out by: econle

You were checked in by: ASean

Total Balance Due: 0.00

Post Date	Description	Comment	Amount
3/27/15	Visa Payment		(67.19)
		XXXXXXXXXXXX	
3/27/15	Room Charge		59.99
3/27/15	City / County Tax		4.20
3/27/15	State Tax		3.00
3/28/15	Room Charge		59.99
3/28/15	State Tax		3.00
3/28/15	City / County Tax		4.20
3/29/15	Cash		(67.19)
3/29/15	Guest Refund		67.19
3/29/15	Visa Payment		(67.19)
		XXXXXXXXXXXX	

Folio Summary 3/27/15 - 3/29/15

Room Charge	119.98
State Tax	6.00
City / County Tax	8.40
Cash	(67.19)
Guest Refund	67.19
Visa Payment	(134.38)

Balance Due: 0.00

This rate is not eligible for partner rewards.

By signing, you are authorizing these charges to be billed to the credit/debit card on file.

I agree that my liability for these charges is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay the full amount of stated charges.

Thank you for choosing Quality Inn at Collins of Cedar Rapids!
Visit ChoiceHotels.com/VerifiedReviews to post your comments about your recent experience.

X

CHOICEprivileges

Thank you for your stay. Visit ChoiceHotels.com/VerifiedReviews to post your comments about your recent experience (Click the 'Write a Review' button)

 Enjoy Every Season With Us!
**CEDAR RAPIDS
PARKS & RECREATION**

INVOICE

25 January 2015

PAID
1-30-15

Payable upon receipt

1	Ultimate Team Bid Fee	\$225 ea	\$225
	Old Capitol Open – March 28 & 29, 2015		
	Cedar Rapids, Iowa		
		Total Due:	\$225

DUE BY FEBRUARY 19, 2015 - Bids not received by this date will be assessed a late fee of \$75.

Payments can be made via check payable to **City of Cedar Rapids** and mailed to the address listed below, or you can pay via credit card by calling (319) 286-5731 between 8am and 5pm, Monday - Friday.

City of Cedar Rapids Parks & Recreation Department
Ambroz Recreation Center • 2000 Mt. Vernon Road SE • Cedar Rapids, Iowa 52403-3399
Phone: (319) 286-5731 • Fax: (319) 286-5732

[REDACTED]

08-10

1039

1-27-15

18-1/1018
3212

PAY TO THE
ORDER OF

City of Cedar Rapids

DATE

\$ 225.00

Two hundred + twenty five $\frac{00}{100}$

DOLLARS



Security
Features
Detailed on
Back



Commerce BankSM

Springfield, MO 65867
www.commercebank.com

3212

FOR OCO bid 2015

[REDACTED]

[REDACTED]

[REDACTED]

1039



Snapshot			
Account Name:	myBusiness Checking	Current Balance:	
Account Number:		Available Balance:	
Today's Date:	4/8/2015		

Account Activity

Pending Transactions

Date	Description	Debit	Credit
There are no pending transactions for this account.			

Posted Transactions

Display 25 Transactions per page. Viewing 1 - 4 of 4					<< < 1 > >>
Date	No.	Description	Debit	Credit	Running Current Balance
2/3/2015	1039	CHECK IMAGE PRESENTED View Front Or Back	\$225.00		
Display 25 Transactions per page. Viewing 1 - 4 of 4					<< < 1 > >>

Want more account history?

Adobe® Reader® required to view images. **
* Details in the Snapshot are intended for general informational purposes only. Such details are not intended to be an exhaustive list of all applicable terms related to your account and shall be superseded by any conflicting terms contained in the applicable governing documents.
** Please note: This application makes use of PDF formatted documents to present information to users. When viewed, these PDF files are downloaded by your web browser before they are displayed and may be saved on your computer after you log out of this application. Since Commerce Bank can't control the security of these files once they are downloaded on your computer, we recommend you use this application only on personal computers with adequate security or clear the web browser cache after logging out of this site to prevent unauthorized access to these files.