

ACE MENTOR REIMBURSEMENT FORM

*Please submit total amounts at the end of each semester *

Role: _____

Phone:_____

School:

Date: _____

Mailing address for sending the check:

	Date of Purchase	Name of Vendor	Reason	Amount
	(Sample) 10.15.21	Dominos Pizza	i.e. Pizza Party, ACE Meeting	\$62.50
1				\$
2				\$
3				\$
4				\$
5				\$
6				\$
			Total	\$

SUBMIT TO:

ACE Mentor Treasurer Anthony Damon: anthony.damon@dpr.com

Submit this form for either advanced payment with vendor invoice OR reimbursement with a receipt.

Reimbursements will be made if a request has been budgeted for the fiscal year and the request is under budget. If a request is over budget or not contained in the existing budget, the requestor may schedule their request for the next Executive Committee agenda for discussion and vote by the Board.