RSO REIMBURSEMENT PURCHASE REQUEST FORM  
(OVER $100.00)  

Please understand that all reimbursements are paid by check and can take 6 to 10 weeks to process

Office of Student Engagement  
Student Center Rm 318 MC 4425  
Carbondale, IL 62901  

Accountant Contacts:  
Tracy Lake  618-453-2521  
tlake@siu.edu  
Richel Biby  618-453-7528  
richelb@siu.edu

RSO REQUIRED INFORMATION - Please Print Neatly or Payment May Be Delayed

RSO FULL NAME:  
PAYEE NAME:  
PAYEE MAILING ADDRESS:  
PAYEE EMAIL ADDRESS:  
PAYEE PHONE NUMBER:  
PAYEE DAWG TAG:  

DESCRIPTION OF REIMBURSEMENT

Is the Payee an International Student?  
☐ NO  ☐ YES  
Is the Payee any of the following?  
☐ Student  ☐ Student Worker  ☐ Staff

DATE REQUESTED:  
AMOUNT REQUESTED:  

□ NO  □ YES - Event Name ____________________________

Payment requested by:  
☐ Check  ☐ Debit Dawg

RSO Chapter Officer Printed Name and Title:  
RSO Chapter Officer Signature:  
RSO Officer to contact about this expenditure:  
Contact Phone #:  
Contact email:  
Adviser Signature:  
Email/Phone:  

ACCOUNTANT USE ONLY

ACCOUNT TITLE:  
ACCOUNT BP#  
PCARD HOLDER:  
OBJ #  

FISCAL OFFICER APPROVAL:

QTY  UNIT  DESCRIPTION OF ITEMS PURCHASED  UNIT $  TOTAL AMOUNT

PCARD TRANSACTION #  
RECONCILIATION DATE