



# Spring Hill College | Pathways to Purpose

## Small Group Reimbursement Form

Submit this form with original, itemized receipts to the Administrative Director for Pathways to Purpose. This form must be printed and signed to receive reimbursement.

Small Group Name or Identification Number

### Information about Meeting

*Please attach proof of meeting (at least 1 of the following): agenda, meeting minutes, written summary, individual reflections from all group members present.*

*Please attach proof of expenditures: original, itemized receipts.*

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Location: \_\_\_\_\_

Group Members [please list name of each member in attendance]:

Reimbursement check made out to [please list the name & ID# of the individual]:

\*To have a check cut, the individual must have a W-9 on file in the finance office, we recommend the faculty/staff member be the one to request the reimbursement.

Brief description of activities and topics:

Total Reimbursement Request:

\$

Reimbursement Type:

Food/Beverage     Activity/Event     Other:

Meeting dates planned for the year (please include this meeting and all prior meetings):