

FIVECOLLEGE DIGITAL HUMANITIES

FIVE COLLEGES, INC.
97 SPRING ST
AMHERST, MA 01002

reimbursement

DATE:

OFFICE USE ONLY
REIMBURSEMENT

Undergraduate Fellows

Project Code:

Reimbursement No.:

Approval:

NAME:

ADDRESS:

EMAIL:

| Description | Purpose (please indicate travel or supplies) | Cost |
|-------------|---|------|
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| | | |
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| | | |
| | | |

Please prepare a check in the amount of:

SIGNATURE:

Include all receipts along with submission of this form. For non-digital receipts, attach to form with a paper clip.