

Joint Institute for Marine and Atmospheric Research (JIMAR)

**REIMBURSEMENT FOR CASH PURCHASES**

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

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

ITEMIZED LISTING OF RECEIPTS

*Attach all receipts. Tape receipts to 8-1/2 x 11 paper. Please do not tape over critical information.*

No.	Amount	Date Received	Description
1.	\$ _____	_____	_____
2.	\$ _____	_____	_____
3.	\$ _____	_____	_____
4.	\$ _____	_____	_____
5.	\$ _____	_____	_____
6.	\$ _____	_____	_____
7.	\$ _____	_____	_____
8.	\$ _____	_____	_____

TOTAL: \_\_\_\_\_

Project No. \_\_\_\_\_

PROJECT PAYMENT APPROVAL: I certify that services have been rendered and/or that the materials, supplies and incidentals have been received in good order and condition and are in direct support of the program as indicated on the project number line.

Approved by: \_\_\_\_\_  
Principal Investigator/Supervisor Date

Approved by: \_\_\_\_\_  
Fiscal Officer Date