



1020 "O" Street, Sacramento, CA 95814

Check one: Reimbursement Direct Pay

Claimant	
Address	
Phone	

Payee (if different)	
Address	
Phone	

Purpose:					
DATE	ITEM	AMOUNT	RECEIPT ATTACHED? Y/N	COMMITTEE	APPROVAL
TOTAL					

If committee expense, please submit to Committee Chair for signature. Original signatures needed below.

Signature: _____ **Date:** _____

Signature -- Committee Chair: _____ **Date:** _____

MAIL TO: Liz Phillips
 UC Davis Library
 100 North West Quad
 Davis, CA 95616

For Treasurer Use Only:			
Date Paid:	Check #:	Amount:	Fund:

Unbudgeted expenses of \$26.00 to \$100.00 must receive prior approval from the Treasurer.
 Unbudgeted expenses of \$101.00 to \$149.00 must receive prior approval of the President.
 Unbudgeted expenses over \$150.00 must receive prior approval of the Board.
 2019 Mileage Rate: \$0.58 per mile.