UNIVERSITY OF CALIFORNIA, SANTA BARBARA
Computer Science Department

MEMBERSHIP REIMBURSEMENT

Section 1 - to be completed by person incurring expense **Date:**

Name:
Email address:
Membership to:
New:
Renewal:
To secure periodical:
Effective dates: From: To:
Amount:
(circle): Credit Card Cash Check

Section 2 - to be completed by PI

Account to be charged (specified by PI):		
PROJECT CODE	ACCOUNT #	FUND #
Purpose/justification: Including		
X		
PI APPROVAL SIGNATURE (PI = Principal Investigator for funding source		

Please attach **original receipts** showing amount paid and method of payment.

***** all fields of form must be completed *****
incomplete forms will <u>NOT</u> be processed and will be returned.