

NSF-sponsored


 Chemistry Collaborations, Workshops  
& Communities of Scholars


## Participant Reimbursement

Please print or type the following information:

<b>Name:</b>	<b>Name &amp; Dates of Workshop:</b>
<b>Address:</b>	
<b>City, State, Zip:</b>	

Account Number (use Speed type or Account Distribution below): for GSU use only

Fund	Organization	Program	Subclass	Budget Year	Project	Amount	Speed type
20	110800000	1110	61000	2011	CCWCS		SP00010602

### Estimated Expenses:

Line	CATEGORY	FOOD/	Amount
1	Day 1		
2	Day 2		
3	Day 3		
4	Day 4		
5	Day 5		
6	<i>Other</i>		
7			
		<b>TOTAL:</b>	

### Comments:


### Participants *MUST* sign below!

<b>Participant Signature:</b>		<b>Date:</b>
<b>Participant Email</b>		<b>Phone:</b>
<b>CCWCS Approval:</b>		<b>Date:</b>

This authorization does not imply automatic approval of individual items of expense. Actual expenses will be reimbursed in accordance with GSU regulations. Please include your *original, detailed* receipts. All forms & receipts should be submitted within 30 days of workshop completion. Please allow 4-6 weeks for receipt of payment.

**Thank You!**

Please mail this form & your original receipts to:  
 Karen Brown, Georgia State University, Dept. of Chemistry, PO Box 4098,  
 Atlanta, GA 30302-4098

?Questions?? Email: [kbrown45@gsu.edu](mailto:kbrown45@gsu.edu) or call 404-413-5546