



# Thompson Rivers University Students' Union

Local 15 Canadian Federation of Students

## Educational Event Reimbursement Form

Event Name: \_\_\_\_\_

Application Number: \_\_\_\_\_  
(Found at the top of the PDF application you were emailed)

Primary Applicant: \_\_\_\_\_

_____	_____
Name	Signature
_____	_____
Email	Phone

(By signing this form you are verifying that all enclosed receipts and related expenses are valid and fall within the educational event funding guidelines)

Staff/Faculty Advisor: \_\_\_\_\_

_____	_____
Name	Signature
_____	_____
Email	Phone

Student Group \_\_\_\_\_

Cheque to: \_\_\_\_\_

Delivery Information:  Pick up at the Members' Services Desk  
 Mail to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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## Educational Event Expenses

Food/Beverage Receipts Description	Amount
Food/Beverage Receipts Subtotal:	
Artist/Speaker/Performer Receipts Description	Amount
Artist/Speaker/Performer Receipts Subtotal:	
Sound/Production Receipts Description	Amount
Sound/Production Receipts Subtotal:	
Venue Receipts Description	Amount



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Venue Receipts Subtotal:	
<b>Materials/Supply Expenses</b>	<b>Amount</b>
Materials/Supplies Receipts Subtotal:	
Receipts Total:	

### Documentation:

Receipts must show the individual expenses incurred and any included taxes. A receipt showing only a credit card or debit card transaction is not acceptable.

### Eligible Expenses:

Only expenses in the categories outlined above are eligible for reimbursements. Other expenses cannot be reimbursed by a TRUSU Grant

### Submission:

Drop this form and receipts off at the Members' Services Desk in the Students' Union Building or complete the form digitally and email it to [grants@trusu.ca](mailto:grants@trusu.ca) with your receipts.

\*\*\*For Office Use Only\*\*\*

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

Receiver: \_\_\_\_\_

Signature: \_\_\_\_\_