

Entered by: _____ Date: _____ Voucher#: _____

BIMS Recruiting Meal Reimbursement Request

To receive your meal reimbursement:

- ✓ Attach the **itemized receipt** and the **signed credit card receipt** showing the total amount you paid to the back of this form; tape only the outer edges of the receipts.
- ✓ Return this form to your BIMS Administrator within 14 days after the meal

Maximum reimbursements:

\$17/person for Breakfast, \$18/person for Lunch, \$31/person for Dinner (These limits exclude tax and tip)

- ✓ *The maximum reimbursable tip is 20% of the **untaxed** food and beverage cost. For groups, some restaurants **automatically add a 20% gratuity (tip)**, so do not add a tip in addition to a gratuity!*
- ✓ *Limit: one alcoholic beverage for dinner only if under expense limit.*

Payee (print name):		Your 9-digit # on ID	
Date of recruiting		Restaurant:	
Total amount of	\$	Number of attendees:	

Type of Meal: Breakfast Lunch Dinner

Who attended: Print first and last name, and circle "UVA" or "Applicant."

	Print Name	UVA or Applicant <i>(circle one)</i>
1		UVA or Applicant
2		UVA or Applicant
3		UVA or Applicant
4		UVA or Applicant
5		UVA or Applicant
6		UVA or Applicant
7		UVA or Applicant
8		UVA or Applicant
9		UVA or Applicant
10		UVA or Applicant

Payee (signature required): _____

This form must be signed and dated by the appropriate persons and the original maintained in the department, along with all receipts. All information on this form must be completely consistent with the information entered on the Payment Voucher requesting payment or reimbursement for the meal.

PTAO:	
BIMS Admin Name PRINTED:	
BIMS Admin Signature & Date:	
Approver & Date:	