

EXPENSE REIMBURSEMENT FOR NON-COLLEGE EMPLOYEES AND STUDENT STIPENDS

DO NOT USE FOR HONORARIUMS

NAME (Print)				CUNYFIRST ID #				
ESS								
:#		EN	MAIL					
N OF PAYMEN	NT							
NT NAME								
NYCCT STUDENT Y/N				PAID ON STATE PAYROLL Y/N				
MIZED EXPE	NSE AMO	UNTS AND	BRIEF DE	CRIPTION	S (PLEASE	ATTACH REC	EIPTS)	
				\$				
				\$				
				\$				
	GRAI	ND TOTAL \$						
		<u>STUDENT</u>	STIPEND I	NFORMAT	<u>ION</u>			
STUDENT STIPEND Y/N				SEMESTER / YEAR				
STIPEND AMOUNT \$				DEPARTMENT NAME				
		CUNY	FIRST CHA	RTFIELDS				
CUNYFIRST DEPT. #	FUND CODE	MAJ PURP.	OPER UNIT	PROG CODE	FUND SRCE	ACCOUNT	SPCL INIT.	
		<u>AUTHORIZ</u>	ATIONS AI	ND APPRO	VALS			
RECEIPENT'S SIGNATURE						DATE		
S SIGNATURE						DATE		
	# N OF PAYMEN NT NAME DENT Y/N SMIZED EXPE	SSS	#ENO OF PAYMENT NT NAME DENT Y/N GRAND TOTAL \$ STUDENT FIPEND Y/N CUNYFIRST FUND MAJ DEPT. # CODE PURP.	#EMAIL NOF PAYMENT NT NAME DENT Y/N GRAND TOTAL \$ STUDENT STIPEND II FIPEND Y/N SEMESTER / MOUNT \$ DEPARTMEN CUNYFIRST FUND MAJ OPER DEPT. # CODE PURP. UNIT	ESS	ESS	#EMAIL	

A/P EXPENSE RECORD NO. _____