

**PURDUE RESEARCH FOUNDATION
Discretionary Fund Reimbursement Request**

Department: _____

Date: 6/3/2008 _____

Fund Number: _____

Purpose of Expense: _____

Payable to: _____

Amount \$ _____

Note: Documentation must be attached.

Form prepared by: _____

Phone: _____

APPROVALS:

Department Head

Date

Send the original to PRF Discretionary / PTC.