

Texas A&M University-Kingsville
7 U D C A R Refund Form

Name of Cardholder: _____

UIN: _____

Bring completed form to Procurement and Travel f-3 (o)-F-7 ()-3 (T)-2 (ra)-7 (v)-14 (e)-7 (l)-9 ()-3 (f-3 (o)-F-7 ()-3 (T)-2 (ra)-7 (v7 EMC 06 490.9 n BT /TT1 sity)Ti n BT /T

			Sub-Account Number	Object code	Vendor	Amount	Description of Expense	PTS Initials
7	50%	7						
7	50%	7						
7	50%	7						
7	50%	7						
7	50%	7						

7 50% 7

Do not mail cash.

Reimbursement has been made for the following reason:

Expense Report Name & Key	
Original Account & Obj Code	

Kingsville, Texas 78363

Contact Information travel@tamuk.edu