

### REIMBURSEMENT REQUEST

**Notes:**

- Reimbursement Requests are due Mondays by 4:00 p.m.
- Lifeworks can only reimburse expenses up to 10 months past date of service/date of travel.
- Submit Monthly

Mail: Lifeworks Services, Inc.  
2965 Lone Oak Drive, Suite 160  
Eagan, MN 55121

Or FAX: 651-454-2773

**Lifeworks Coordinator:** \_\_\_\_\_ Month \_\_\_\_\_

**Client Name:** \_\_\_\_\_

**Please Issue Check to:** \_\_\_\_\_

**Mail Check to: (Address)** \_\_\_\_\_

Receipt #	Date	Description	Amount	Budget Task (Office Use Only)
<b>Total Reimbursement:</b>			\$	

Support Manager Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

This information can be made available  
in an alternate format upon request.  
Our TTY phone number is 651-365-3736.  
Equal Opportunity Employer.  
06/24/2011

<p align="center"><b>FOR OFFICE USE ONLY</b></p> <p><b>APPROVED:</b> _____</p> <p><b>DATE:</b> _____</p>
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