



Business-Related Cell Phone Reimbursement

This form is used for the authorization of business-related cell phone service reimbursement for an employee-owned cell phone. **The form must be submitted in Emburse expense for payment processing.**

PAYMENT INFORMATION			
Employee Name:		Red ID:	
Department:		Title/Position:	
Cell Phone Number:		Email Address:	
Service Plan (i.e. Unlimited Voice, Text & Data):			
<i>User Usage Levels: Low-level user 10%, Mid-level user 50%, High-level user: 75%</i>			
Monthly Rate (A)	Usage Level (%) (B)	# of Months This Calendar Year (C)	Total Authorized Reimbursement (A x B x C)
Justification Provide specifics. Describe particular responsibilities that can only be accomplished with this wireless device. Note: "Used for business purposes" is insufficient justification.			
The last cell phone service invoice must be attached to this request. By submitting this form, the employee is indicating that the invoice is representative of the basic service plan and that he/she does not already receive internet reimbursement from other sources.			

ALL SIGNATURE AUTHORITY APPROVALS WILL BE DONE THROUGH EMBURSE