

SABO Account#: \_\_\_\_\_ SABO Account Name: \_\_\_\_\_ Voucher# C: \_\_\_\_\_

**Consent to Reimburse Form**  
**for SABO reimbursement**

This serves as authorization to reimburse \_\_\_\_\_  
for purchases he/she/they have made on behalf of a Rutgers University  
registered Student Organization using my personal credit card.

I agree the amount of \$ \_\_\_\_\_ , was charged to my personal credit  
card on \_\_\_\_\_ and agree by signing this form the reimbursement  
will be made to the student and not to me personally.

\_\_\_\_\_  
Name of credit card holder

\_\_\_\_\_  
Signature of credit card holder

\_\_\_\_\_  
Relation to student i.e. (parent, spouse, other)

**Student Name:**

**Student Rutgers NetID:**

**Please attach this form to the credit card statement and the SABO PERR  
form for reimbursement.**