Travel Expense Reimbursement Request

- Please complete the information below as accurately as possible.
- Include all receipts; receipts must show proof of payment. Documentation can include a bank statement showing the payment.

Today's Date:		
Name:		Employee/Student ID:
Address:		
Address:		<u> </u>
City:	State:	ZIP:
Department:		
Purpose of Trip:		
Traveling To/From:		
Departure Date and Time:		
Return Date and Time:		
Please check the expenses you a	ire requesting	to be reimbursed:
Air Transportation	Meals	
Lodging Registration	Mileag Taxi/SI	e huttle Services
Rental Car (did you follow ND		
Were expenses shared by another	er student or e	mployee? If so, please give an explanation.
Were meals provided if you atten	ded a confere	nce? If so, please give an explanation.
Did the hotel provide breakfast?	YES	NO
Is there any other unique information	tion regarding	the travel which we should know about?
Funding (required):		