

NON-EMPLOYEE TRAVEL REIMBURSEMENT REQUEST FORM

Clear Form

Legal First Name: _____

Legal Last Name: _____

Faculty or Staff who authorized travel: _____

If requesting per diem, dates and meals (breakfast/lunch/dinner) claiming:

If requesting per diem, list any meals provided by conference, hotel, University, etc:

Expenses to Submit – Check all that apply

<input type="checkbox"/>	Per Diem	\$ _____
<input type="checkbox"/>	Conference Registration	\$ _____
<input type="checkbox"/>	Lodging (Itemized invoice required)	\$ _____
<input type="checkbox"/>	Ground Transportation (Taxi, Uber, Lyft, etc)	\$ _____
<input type="checkbox"/>	Rental Car	\$ _____
<input type="checkbox"/>	Fuel for Rental Car	\$ _____
<input type="checkbox"/>	Flight	\$ _____
<input type="checkbox"/>	Parking	\$ _____

Mileage (If personal vehicle used for travel) _____

Address driven to & from: _____

Other \$ _____ Please Describe: _____

Note:

- Proof of payment receipts must be submitted for all requested travel expenses.
- Receipts must show that payment was made for the expense.
- Typically, payment should have last four digits of credit card number showing payment was made to that credit card.