



### Non Employee Reimbursement Form

This form is used for expenses incurred for lodging, travel, meals, etc. The information is required for all guests of the College of Engineering in order for any reimbursement to occur. **Original** receipts for all expenses **must** be submitted with this form. We do not accept receipts for gas. Please submit miles traveled for reimbursement for auto travel with to and from addresses. E-tickets are acceptable but must clearly state the flight information and cost. General travel itineraries cannot be accepted.

**All information MUST be completed for a reimbursement to be issued (including social security #).**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Local Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Are you a U.S. citizen? Yes \_\_\_\_\_ No \_\_\_\_\_

Permanent Address: \_\_\_\_\_

For Department Use Only
Purpose Code _____
Account Code _____
Userfield _____

Date(s) of Visit: \_\_\_\_\_ Purpose of Visit: \_\_\_\_\_

Sponsoring University Department: \_\_\_\_\_

Departmental Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Where would you like your reimbursement check mailed? Local address \_\_\_\_\_ Permanent address \_\_\_\_\_

#### Expenses for which reimbursement is requested:

Type of Charge	Amount	Have Receipt?
Airfare		
Train		
Meals		
Ground Transportation		
Tolls		
Parking		
Mileage		
Other		
<b>Total Reimbursement</b>	<b>\$</b>	

Please remember to submit **original** receipts with this form. Completed forms, required receipts, and any other documentation submitted, will not be returned. Please keep copies of all items for your records. Please allow 3-4 weeks for reimbursement.