



# Out-of-Pocket Expense Report

Reimbursement request for expenses paid from the employee or student's personal funds

Organization # \_\_\_\_\_

Name (Please Print) \_\_\_\_\_

Email/Student ID \_\_\_\_\_ Signature/Date \_\_\_\_\_

Department Head Signature/Date \_\_\_\_\_

Please be sure to include a brief, yet specific purpose/description of all expenditures.

If the expenditure is for meals or entertainment, list everyone who ate or was entertained.

Officer Approval (if necessary) \_\_\_\_\_

## Travel Expenses - Attach receipts

Date	Vendor	Amount	Description/ Purpose (to satisfy IRS requirements)		
		\$			
Mileage on personal auto- _____ miles x \$.50					
<b>Total Travel Expenses</b>		<b>\$</b>			

## Other Expenses - Attach invoices, receipts, and/or other documents with descriptions sufficient enough to satisfy IRS requirements.

Date	Vendor	Amount	Orgn	Acct	Description/Purpose
		\$			
<b>Total Other Expenses</b>		<b>\$</b>			

<b>Total Expenses - Travel &amp; Other</b>	<b>\$</b>
<b>Advance (Enter as Negative)</b>	<b>(\$ )</b>
<b>Total Expenses Less Advance Due To / From Employee</b>	<b>\$</b>

If money is due **from** the employee, please submit payment to the Cashier and forward this form to Accounts Payable.  
 If money is due **to** the employee, please submit directly to Accounts Payable.

Submit a copy to the Business Office; retain a copy for your records.