

UNIVERSITY OF PENNSYLVANIA
OFFICE OF THE COMPTROLLER
TRAVEL AND ENTERTAINMENT EXPENSE REPORT

- International Student** (attach copy of Passport/Visa/I-94 card)
 Visiting Non-resident Alien (attach copy of Passport/Visa/I-94 card)

- Faculty/Staff** (last 4 digits of SSN)
 Student (last 4 digits of SSN)
 Other (attach W-9 with SSN)

PART I: PAYEE INFORMATION

PAYEE <small>LAST</small>	FIRST	MI	VENDOR#
MAILING ADDRESS (ONLY NECESSARY IF "STUDENT" OR "OTHER")			
PURPOSE OF TRIP OR EVENT			PHONE NUMBER
DESTINATION(S)	BEGINNING DATE (MM/DD/YYYY)	TIME	ENDING DATE (MM/DD/YYYY) TIME
I CERTIFY THAT THE EXPENDITURES LISTED BELOW WERE INCURRED BY ME WHILE ON OFFICIAL UNIVERSITY BUSINESS, ARE ACCURATE AND THAT I AM NOT REQUESTING REIMBURSEMENT FROM ANY OTHER SOURCE.			
SIGNATURE OF PAYEE X _____			

PART II: RECORD OF EXPENSES

DATE (MM/DD/YY)	DESTINATION	DESCRIPTION	AMOUNT	DATE	DESCRIPTION	AMOUNT	DATE	DESCRIPTION	AMOUNT	TOTALS \$
TRAVEL										
		AIRFARE, RAIL, BUS								\$ -
		CAR RENTAL & GAS								\$ -
		PRIVATE CAR m @ ¢								\$ -
		TAXIS/LOCAL TRANSPORT.								\$ -
		PARKING TOLLS								\$ -
PER DIEM										
		BREAKFAST								\$ -
		LUNCH								\$ -
		DINNER								\$ -
		REFRESHMENTS								\$ -
LODGINGS										
		TIPS (OTHER THAN MEAL/TAXIS)								\$ -
		TELEPHONE, POSTAGE								\$ -
		OTHER (E.G., REGISTRATION)								\$ -
TOTAL EXPENSES PER DAY			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ENTERTAINMENT AND BUSINESS MEALS			ATTACH ENTERTAINMENT AND BUSINESS MEAL WORKSHEET (C-1A) AND ENTER TOTAL HERE. FOR BUSINESS MEALS USE CODE 5209. FOR EXPENSES THAT ARE ENTERTAINMENT RELATED, USE OBJECT CODE 5214.							

PART III: EXPENSE RECONCILIATION (If using more than one form, show total on top form and number pages)

ADVANCES: LIST ALL OUTSTANDING ADVANCES WHICH APPLY TO THIS REIMBURSEMENT. (PREPAYMENTS ARE NO LONGER CONSIDERED AN ADVANCE AND NEED NOT BE LISTED). _____ _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>GRAND TOTAL OF EXPENSES</td> <td>\$ -</td> </tr> <tr> <td>LESS ADVANCES:</td> <td></td> </tr> <tr> <td>BALANCE DUE PAYEE:</td> <td>\$ -</td> </tr> <tr> <td>BALANCE DUE UNIVERSITY:</td> <td>\$ -</td> </tr> <tr> <td colspan="2" style="text-align: center;"><small>(ATTACH COPY OF VALIDATED D SLIP)</small></td> </tr> </table>	GRAND TOTAL OF EXPENSES	\$ -	LESS ADVANCES:		BALANCE DUE PAYEE:	\$ -	BALANCE DUE UNIVERSITY:	\$ -	<small>(ATTACH COPY OF VALIDATED D SLIP)</small>	
GRAND TOTAL OF EXPENSES	\$ -										
LESS ADVANCES:											
BALANCE DUE PAYEE:	\$ -										
BALANCE DUE UNIVERSITY:	\$ -										
<small>(ATTACH COPY OF VALIDATED D SLIP)</small>											

PART IV: ACCOUNTING INFORMATION

LAST NAME OF PAYEE	BALANCE DUE	26-DIGIT ACCOUNT NUMBER (# of digits in each segment)						
		CNAC (3)	ORG (4)	BC (1)	FUND (6)	OBJ (4)	PROG (4)	CREF (4)
AUDITOR APPROVAL								

PART V: APPROVALS

EMBOSSED IDENTIFICATION _____ _____	SIGNATURE OF BUDGET ADMINISTRATOR _____ TYPE NAME OF BUDGET ADMINISTRATOR _____ ADDITIONAL APPROVAL SIGNATURES (IF NECESSARY) _____			
DEPARTMENT NAME	DEPARTMENT ADDRESS	MAIL CODE	TELEPHONE	DATE
				1/9/2003

