TRINITY UNIVERSITY EXPENSE REIMBURSEMENT

NAME	DATE	FOR BUSINESS OFFICE USE ONLY
ACCOUNT NUMBER	**CONTROL NUMBER**	

DAILY LISTING OF EXPENSES

EXPENSE ITEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTAL
	P-CARD								
Mileage	OTHER								
	P-CARD								
Plane, Train, Bus	OTHER								
	P-CARD								
Taxi, Limousine	OTHER								
	P-CARD								
Breakfast	OTHER								
	P-CARD								
Lunch	OTHER								
	P-CARD								
Dinner	OTHER								
	P-CARD								
Lodging	OTHER								
	P-CARD								
Registration Fees	OTHER								
	P-CARD								
Other Expenses	OTHER								
	P-CARD								
Leased Vehicle	OTHER								
	TOTAL								

DETAIL OF EXPENSES WITH NO RECEIPT

DATE	AMOUNT	DESCRIPTION

Less: Air Fare	
Less: Hotel	
Less: Registration	
Less: Returned	
Less:	
Less:	
Less: PCARD	
Less: Cash Advance-(if any)	
Total Reimb. /Amount Owed	

ODOMETER READINGS

START	END	DESCRIPTION

COMMENTS OR INSTRUCTIONS

TRAVELER DATE

APPROVED BY DEAN DATE

APPROVED BY DIRECTOR/CHAIR DATE

APPROVED BY VICE PRESIDENT/PRESIDENT DATE