

KENT STATE UNIVERSITY

EXPENSE STATEMENT

PLEASE PRINT OR TYPE

INDIVIDUAL'S NAME			ADDRESS				CITY			STATE		ZIP		
REASON FOR EXPENDITURE			NAME OF ACCOUNT							ACCOUNT NUMBER/SUBCODE				
DATE	TRAVEL POINTS	TIME OF DEP. AND ARRIVAL	TRANSPORTATION					MEALS			MISCELLANEOUS			
			AIR,BUS, TRAIN,ETC	PERSONAL CAR MILEAGE AMOUNT		OTHER (TAXI,ETC.)	LODGING	BREAK.	LUNCH	DINNER	AMOUNT	EXPLANATION	TOTAL	
TOTALS														
I HEREBY CERTIFY THAT THE EXPENSES LISTED ABOVE WERE INCURRED BY ME AND ARE IN COMPLIANCE WITH UNIVERSITY REIMBURSEMENT POLICIES AND REGULATIONS.			APPROVAL(S) _____ _____ VIP (IF REQUIRED) _____							DATE		LESS TRAVEL ADVANCE		
										LESS EXPENSES UNAUTHORIZED				
SIGNATURE DATE										AMOUNT TO BE REIMBURSED (OR RETURNED TO UNIVERSITY)				
										SUBMIT FORM TO PROCUREMENT - PAYMENTS				
REMARKS														