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TCU Reimbursement Form

First Name: Smith (your last name)	Last Name: Joe (your first name)	Employee ID: 123456789	
Dept. Name: GlobalEX-QEP	Business Purpose: GlobalEX participant	Destination: local	
Extension: 6232 / TCU Box: 298510	Receipts attached? ☒ Yes ☐ N/A	Direct Deposit? ☐ Yes ☒ No	

To enter dates for non-consecutive days, check this box. You will need to enter the dates beginning on the 2nd column. ☑ Date

		Tuesday 09/20/2016	Monday 09/26/2016					Totals
1. Breakfast - Cost (including tip) - attach original receipt. To itemize expense (optional) click here.								
2. Lunch - Cost (including tip) - attach original receipt. To itemize expense (optional) click here.								
3. Dinner - Cost (including tip) - attach original receipt. To itemize expense (optional) click here.								
4. Meals/Refreshments for others - Cost (including tip and cost for self). Complete "Line 4 Requirements" on second page of this form. Attach original receipts.		$55.00						$55.00
5. Lodging - Cost per night (including deposits) - other expenses, such as meals and telephone, parking, etc., should be reported on separate lines. Attach original itemized hotel bill. To itemize expense (optional) click here.								
6. Air - Attach original receipt (ticket). If ticket is not prepaid by TCU, attach invoice or other evidence of support. Please enter your total air miles in the space provided to the right: _____ MILES								
7. Taxi/Limo - Cost (including tip) - attach original receipt. To itemize expense (optional) click here.		$10.00	$15.00					$25.00
8. Mileage Reimbursement - Enter mileage reimbursement in the "Miles" field below. The total will automatically be calculated. Complete "Line 8 Requirements" on second page of this form. Rate $ 0.540 X Miles _____ = Total: $ 0.000								
9. Other Transportation - car rental, railroad, bus, ferry (original itemized invoice required). To itemize expense (optional) click here.								
10. Parking - Enter amounts and attach receipts.To itemize expense click here.								
11. Registration Fee - If prepaid by TCU, leave blank. If not prepaid by TCU, a receipt for cost of fee must be attached. To itemize expense click here.								
12. Other - Miscellaneous expenses. Complete "Line 12 Requirements" on the second page of this form. Attach original receipts.			$40.00					$40.00

Budget Approval

Account	Fund	Dept	Project	Amount

Approver (Printed Name) | Date

Approver Signature

Approver (Printed Name) | Date

Approver Signature

Reimbursement Forms should be submitted for all reimbursable expenses within 30 days after the expense has occurred (45 days for international travel at least 3 weeks in duration). Click here for TCU reimbursement policies and procedures.

REIMBURSEMENTS EXCEEDING A GRAND TOTAL OF $1,000 REQUIRE TWO APPROVAL SIGNATURES.

Supporting Documentation - TCU reimburses per receipt. Specific documents required are described in each of the lines. If appropriate supporting documentation is not attached, the Reimbursement Form will be returned to the employee.

TCU and BRITE are exempt from Texas sales and occupancy tax. Sales tax and occupancy tax exemption certificates are available in the Financial Services office.

BY SIGNING THIS REIMBURSEMENT FORM, YOU CERTIFY THAT ALL EXPENSES SUBMITTED HAVE BEEN PAID BY YOU AND ARE FOR UNIVERSITY RELATED BUSINESS.

Employee Signature | Date

Grand Total	$120.00
Less Advance	
Due TCU	
Due Claimant	$120.00

Approver should verify that invoice number is printed in lower right corner of form.

Invoice #

Rev 4/12/16

Line 4 Requirements **- Complete one line per meal. Click here if you need to enter additional information. For more info click here:**

Date	Name of Person (s)	Title/Occupation	Business Relationship	Reason for Meal	Location	Amount
09/20/2016	members of your team	GlobalEX team members	GlobalEX team members	explore activity	name of place	$55.00

Line 4 Subtotal 55.00

Line 8 Requirements **- Click here if you need to enter additional information.**

Date	Destination	Miles Driven	Purpose

Line 12 Requirements **- Click here if you need to enter additional information.**

Comments
9/28/2016: museum admission tickets for GlobalEX team members [give names, including you]

Approver should verify that invoice number is printed in lower right corner of form.

Invoice #

TCU

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Line 1 Detail

Breakfast

Date	Description	Amount

Line 1 SubTotal: $0.00

Line 2 Detail

Lunch

Date	Description	

Line 2 Subtotal: $0.00

Line 3 Detail

Dinner

Date	Description	

Line 3 Subtotal: $0.00

Line 5 Detail

Lodging

Date	Description	

Line 5 SubTotal: $0.00

Approver should verify that invoice number is printed in lower right corner of form.

Invoice #

TCU

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Line 7 Detail

Taxi/Limo

Date	Description	Amount

Line 7 SubTotal: $0.00

Line 9 Detail

Other Transportation

Date	Description	

Line 9 Subtotal: $0.00

Line 10 Detail

Parking

Date	Description	

Line 10 Subtotal: $0.00

Line 11 Detail

Registration Fee

Date	Description	

Line 11 SubTotal: $0.00

Approver should verify that invoice number is printed in lower right corner of form.

Invoice #