

# UNIVERSITY OF THE INCARNATE WORD

## EXPENSE REIMBURSEMENT

<b>NAME</b>	<b>DATE</b>	<b>Location and Dates</b>
<b>ACCOUNT NUMBER</b>		

DAILY LISTING OF EXPENSES										
EXPENSE ITEM	Date									TOTAL
Airfare										0.00
Registration Fees										0.00
Lodging										0.00
Auto Mileage										0.00
Breakfast										0.00
Lunch										0.00
Dinner										0.00
Parking/Taxi										0.00
Car Rental										0.00
Other Expenses										0.00
	<b>TOTAL</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

DETAIL OF EXPENSES WITH NO RECEIPT			
DATE	AMOUNT	DESCRIPTION	Less: Air Fare
			Less: Registration
			Less: Hotel
			Less:
			Less:
			Less: Cash Advance-(if any)
			Plus: Cash Returned to UIW
			Total Reimb. To Traveler
			<b>\$0.00</b>

ODOMETER READINGS			COMMENTS OR INSTRUCTIONS
START	END	DESCRIPTION	

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