HUMBER STATEMENT OF TRAVEL & OTHER EXPENSES - EMPLOYEE

WE ARE FINANCE

Send completed form to Accounts Payable - B311 (North Campus)

Employee #: _____ Reset Form Email: _____

Name: _____ Phone/Ext: _____

Dept: _____ Campus: _____ Room: _____

FUND	ORGN	ACCT	PROG	AMOUNT	TAX CODE	COMMODITY CODE (From the drop down list, select a code for the type of expense)
TOTAL					Total must equal payment from college or refund to college	

RETURN CHEQUE TO

VENDOR NUMBER

BANNER INVOICE NUMBER

DATE MM/DD/YY	TRAVEL and/or LOCATION DETAILS	PERSONAL CAR $0.40/km km	PERSONAL CAR $0.40/km cost ($)	Travel and/or accommodation costs (attach receipts)	MEALS	SUNDRY (receipts required if over $5)	TOTAL
			.00				.00
			.00				.00
			.00				.00
			.00				.00
			.00				.00
			.00				.00
			.00				.00
			.00				.00
			.00				.00
			.00				.00
			.00				.00
			.00				.00
TOTALS FOR THIS REPORT:			**$ .00**				**$ .00**

Remarks: _____

ADVANCE RECEIVED:

PAYMENT FROM COLLEGE: $ .00

or

REFUND TO COLLEGE: $ .00

CLAIMANT SIGNATURE _____ DATE _____

ADMINISTRATIVE APPROVAL SIGNATURE _____ ADMINISTRATIVE APPROVAL NAME (PLEASE PRINT) _____ DATE _____

FRS008 MAR/2016

Print Form