



2017 TRAVEL EXPENSE REIMBURSEMENT

Accounting Office Use

- Advance Log
Reroute for Completion
Returned to Accounting

Instructions: Complete all sections and turn in this form, including all receipts or supporting documentation, to Accounting by Friday. Checks will be available the following Thursday after 2:00pm.

DEPARTMENT

Department Number: Date Needed: (if different from normal schedule)

CHECK DISTRIBUTION

- Mail Directly
Direct Deposit
Send Inter-Office to:

PAYEE INFORMATION

Name: NU ID Number:
Payee is: NU Employee NU Student This is a new address.

Address Address City State Zip Code

BUSINESS PURPOSE

Business Purpose/Destination(s): Travel Date(s):

TRAVEL EXPENSES

Table with 5 columns: EXPENSE TYPE, MILES, PO #, AMOUNT, GL ACCOUNT #. Rows include Plane/Train/Bus/Ferry, Hotel/Lodging, Meals, Car Rental & Gas, Parking/Tolls, Shuttle/Taxi, Hotel/Airport Tips, Other, and Personal Vehicle. Total Check Amount: \$

Final Payment for this Purchase Order?

REQUIRED SIGNATURES

Student Associations

Employee Requests

STUDENT

EMPLOYEE

PRESIDENT OF ASSOCIATION

DIRECTOR OR DEAN

TREASURER OF ASSOCIATION

VICE PRESIDENT

ADVISOR TO ASSOCIATION