



DEADLINE to submit form: *Immediately after travel event*

Travel expense reimbursements processed after 60 days of the travel end date are taxable through payroll.
Policy link: <https://travel.wsu.edu/policy-revisions/>

Program/Gift
Account #:

Request Date: _____ Requested By: _____

Expense Report Information:

Please list **legal** name of traveler and include preferred name in parentheses.

Traveler Name:	_____	WSU ID #:	_____
Mailing Address:	_____	City, State, Zip:	_____
Trip Start Date:	_____	Trip Start Time:	_____
Trip End Date:	_____	Trip End Time:	_____
Trip Origin:	_____	Trip Destination:	_____

Expense Lines (Total Cost):

Airfare Total Cost: _____ *If self-purchased*
Lodging Total Cost: _____ *Fill in daily lodging rates below*
Lodging Justification (if over per diem) _____

Meal Locations & Daily Lodging Rate:

Fill in city and state for meals (meals reimbursed at per diem for lodging location; single day trips reimbursed at event location per diem).

For meals eligible for reimbursement and per diem amounts go to per diem section
at: <https://acctspay.wsu.edu/welcome-to-travel-reimbursable-services/>

Alcohol is not reimbursable (get a separate receipt)
(including the tax and gratuity for alcohol).

<u>Date:</u>	<u>Breakfast Location:</u>	<u>Lunch Location:</u>	<u>Dinner Location:</u>	<u>Lodging Amount:</u>

Mileage: _____ *Enter total miles driven*

Miscellaneous Expenses Total Cost: _____ *Fill in miscellaneous expenses below*

<u>Business Name/Vendor</u>	<u>Purpose of Expense</u>	<u>Amount</u>

Personal Time Duration (if applicable): _____

Additional Trip Information:

