



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:

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).

<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:

