



SCHOOL OF LANGUAGES, LITERATURES, AND CULTURES
Office of Administrative Affairs

SLLC TRAVEL REIMBURSEMENT REQUEST

- 1. Please complete and submit to Sara Moon after travel with all original, itemized receipts.
2. Please organize and tape small receipts onto one or more sheets of paper. Be sure to write your name, SS#, and Travel Approval Request # on each sheet.
3. Reimbursements must be submitted within 30 days of return.

Name: \_\_\_\_\_

SS#: \_\_\_\_\_

TAR #: \_\_\_\_\_

DEPARTURE DATE: \_\_\_\_\_

RETURN DATE: \_\_\_\_\_

ORIGIN: \_\_\_\_\_

DESTINATION: \_\_\_\_\_

TRAVEL EXPENSES - Please indicate if any expenses are in foreign currency.

Table with 3 columns: Date, Description / Vendor, Amount. Includes a TOTAL row at the bottom.

Notes

\_\_\_\_\_  
\_\_\_\_\_

The following portion is to be completed by the SLLC Business Services Office.

FRS: \_\_\_\_\_ Sub-code: \_\_\_\_\_ BA3 Project Area: \_\_\_\_\_ Requisition #: \_\_\_\_\_

TES Prepared by: \_\_\_\_\_

Date: \_\_\_\_\_