

CBE TRAVEL EXPENSE WORKSHEET

(rev. 10.1.23)

Name:				SA#:			
Email:				Office Phone:			
Departure City:				Destination:			
Departure Date:		Depart Time:		Return Date:		Return Time:	

☐ Check box if this is the **final expense report** for this spend authorization. Do not check if you will have additional expenses for this trip to submit for reimbursement at a later date.

EXPENSES THAT REQUIRE A RECEIPT

- ☐ Lodging/Hotel \$_____ (needed: an itemized receipt showing method of payment or how the transaction was settled, i.e. credit card, cash)
- ☐ Conference Registration \$_____ (needed: an itemized receipt showing method of payment; a conference agenda/itinerary)
- ☐ Car Rental \$_____ (needed: an itemized receipt and rental contract. For non-university contract vendors, LDW and CDW must be purchased)
- ☐ Gasoline (rental cars only) \$_____ (needed: an itemized receipt if expense exceeds \$50. Personal vehicles will be reimbursed for miles driven)
- ☐ Mileage _____ miles (print directions/map showing miles driven or provide log with readings for each incident)
- ☐ Airfare to be reimbursed (do not list prepaid airfare here) \$_____ (needed: CTP paid receipt with flight times to verify departure and return times.)

MISCELLANEOUS EXPENSES:

(ground transportation, parking, etc.)

List miscellaneous expense details below. Use a separate line for each occurrence and include a receipt for individual occurrences over \$50.

MEALS

☐ Per Diem (enter dates & check boxes for meals to be reimbursed. Any provided meals will be deducted.)

☐ Actual Cost (enter dates and the amount of each meal. Meals that exceed the maximum per diem will be reduced.)

Date	Expense Type	Amount	Business Purpose/Details	Date	Breakfast	Lunch	Dinner
		\$					
		\$					
		\$					
		\$					
		\$					
		\$					
		\$					
		\$					
		\$					
		\$					
Misc Expense Total		\$		Meals Total (optional)			
				\$			

COMMENTS: (i.e. details surrounding transportation, meals or hotel expenses covered by a third party)

Email travel receipts and all other necessary documentation to the BOC at ENG-BOCTRAVEL@OSU.EDU for processing. The email subject line should include: 1) Traveler Name 2) SA# 3) Dept Name (CBE).