STETSON UNIVERSITY, INC.

Payable To: _____ **Purpose of Trip/Destination:** _____

Vendor Number: _____ **Payee Signature:** _____ **Date:** _____

Department: _____ **Budget Supervisor Signature:** _____ **Date:** _____

Check Address: _____ **Dean/VP Signature (Over $300):** _____ **Date:** _____

Delivery Method: Mail Campus Mail Hold-4-Pick Up **FOAP: See Below**

Reimbursable Expenses

Dates Must Match Receipts Date	Breakfast	Lunch	Dinner	Lodging	Air Travel	Car Rental	Rental Gas	Parking / Tolls	Total
Subtotal (A)									(A)

Personal Auto Expense

Date	From	To	Mileage	44.5 cents p/mile	Total
		Subtotal (B)			(B)

Other Miscellaneous Expenses

Date	Explanation	Total
	Subtotal (C)	(C)

Cash Advances / Non-Reimbursable Expenses (To Reflect Total Trip Cost)

Date	Explanation / Check Number	Total
	Subtotal (D)	(D)

Grand Total (A+B+C+D)	
Minus Cash Advances / Non-Reimbursable	( )
Net Amount Due Stetson	
Total Reimbursement/Check Amount	

Fund	Org	Account	Program	Amount
				$
				$
				$
				$
				$

Policy Reminders

Meal Reimbursements Require Original Itemized Receipts, Business Purpose, and Name of Guests

Stetson University is exempt from Florida State Sales and Use Tax.

Reimbursable expenses are for incidental costs incurred during the course of business.

Unless approved in advance by the President, respective Dean or Vice President, the cost of alcoholic beverages will not be reimbursed.

The Stetson University Accounts Payable Department now offers ACH Direct Deposit for all Faculty, Staff, and Students

Additional Information Can Be Found On The Finance Office Website: http://www.stetson.edu/administration/finance/forms.php