## **Expense Request Form**

EMPLOYEE TYPE OR AFFILIATION			PAYMENT TYPE (CHECK ONLY ONE)			
☐ Employee			Out of Pocket			
☐ Invited Guest/Visitor - complete shaded areas			☐ Other			
Other - complete shaded areas			Reimbursement Method  Direct Deposit (Domestic only)  Cash Paper Check			
Date: Requestor Name:						
Olivet ID#:			US Citizen or Permanent Resident:YesNo Permanent Residents indicate Resident alien card # If you are not a US Citizen or Permanent Resident, provide: Visa Type: Country of Tax Residency:			
		S PURPOSE (Detailed reason pocation. Also include expense date	for expenditure. For travel or business, include person and/or organization range.)			
	Date		Event Name & Reason for Expenditure			
#1						
#2						
#3						

#4

## **SUMMARY OF EXPENSES**

Business Purpose#	Description (date, detail, etc)	Air Travel	Car Rental	Lodging	Meals	Other	Total
	EXPENSE REPORT TOTAL:						\$
<b>REQUESTOR:</b> <i>I certify that these are all legitimate Olivet University business expenses.</i> I certify that these expenses are in accordance to University policy and have been approved by the department head (Zinzendorf School expenses are subject to pre-approval by the Office of the President).							
SIGNATURE: Date:							
Requestor Permanent Legal Address:							
Requestor Check Mailing Address, if different than Legal:							

OFFICIAL USE ONLY						
I certify that these expenses are in accordance to University policy and have been approved by the department head (Zinzendorf School expenses are subject to pre-approval by the Office of the President):						
Department Head:(Signature)	Date:					
Chief Financial Officer:(Signature)	Date:					
Dean of Administration:(Signature)	Date:					

## **Expense Request Form Instructions**

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- Fill in the expense request form (approximately) before you incur your expenses (1 ITEM PER LINE)
- 2) Check off the type of expense and provide a detailed description of the expense (front page) and then fill in the coding and dollar amount (back page)
- 3) Once the form is completed, sign front page under Requestor field.
- 4) Obtain necessary approvals from Department Heads/Office of the President, followed by signed confirmation by the Chief Financial Officer and Dean of Administration at which time a copy form the Business Office will be provided for your records.
- 5) Save all receipts, the dollar amount of the expense form must equal (approximately) the dollar amounts of the receipts and missing receipt affidavits.
- 6) Submit all receipts and expense form to the Business Office. All employee requests for reimbursement of approved travel and business expenses must be received in the Business Office preferably within thirty (30), but no later than sixty (60) days after completion of a trip, the date of an event or the incurrence of a business expense.
- Reimbursements will be given within 14 business days from submission of receipts to the Business Office.

Common Expense Object Codes:			
<ul> <li>Food+Nonalcoholic Beverages</li> </ul>	100		
Office Supplies+Materials	101		
• Air Travel	102		
<ul> <li>Parking</li> </ul>	103		
<ul> <li>Printing</li> </ul>	104		
Hotel, Lodging	105		
Vehicle Rental	106		