

Business Expense Reimbursement Request



TODAY'S DATE

Instructions: Use this form when requesting reimbursement for faculty or students who are not using the Concur expense management tool. This form may be used for travel reimbursements, as well as incidental, out-of-pocket reimbursement requests. **PLEASE ENTER INFORMATION BELOW FOR THE INDIVIDUAL BEING REIMBURSED.**

FIRST NAME	MIDDLE INITIAL	LAST NAME
EMAIL ADDRESS	PUID NUMBER	BUSINESS PHONE
DEPARTMENT NAME	AFFILIATION <input type="checkbox"/> Faculty <input type="checkbox"/> Student NOTE: Staff must request reimbursement through the Concur expense management tool.	
If this reimbursement request is for travel expenses, please note dates, business purpose, and location of travel below:		
DEPARTURE DATE	RETURN DATE	DESTINATION (CITY/STATE, COUNTRY)
BUSINESS PURPOSE		

DATE (MM/DD/YY)	DESCRIPTION	AMOUNT

TOTAL \$

AMOUNT	Required for all transactions			Optional		Required for capital or sponsored project		
	DEPARTMENT	FUND	ACCOUNT	PROGRAM	SITE	PCBU	PROJECT	ACTIVITY
\$								
\$								
\$								
\$								
\$								
\$								
\$	TOTAL							

Signature and Consent

I certify that:

1. This is a true and accurate accounting of expenses incurred to accomplish official business for Princeton University and there are no expenses claimed as reimbursable which relate to personal or unallowable expenses.
2. All required receipts have been attached to this report.
3. I have not received, nor will I receive, reimbursement from any other source(s) for the expenses claimed.
4. In the event of overpayment or if payment is received from another source for any portion of the expenses claimed I assume responsibility for repaying Princeton University in full for those expenses.

USER (PRINT NAME)	DATE	SIGNATURE
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Departmental Authorization

I certify that I have reviewed the expenses included in this report, including required receipts. I have reviewed the allocation of expenses and confirm that they are compliant, appropriate, and allowable under University policy and any applicable sponsor restrictions.

APPROVER (PRINT NAME)	DATE	SIGNATURE
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- **Send this completed form with the appropriate backup documentation to Procurement Services, 701 Carnegie Center, Suite 161.**
 Questions? Contact the Financial Service Center at (609) 258-3080 or email finance@princeton.edu.