

Travel and Business Expense Report

Payee Last Name						
First Name, MI						
Soc. Sec. #						
Delivery Address: Room #, Building, or Home Address:						
City	State	Zip				
Payee E-mail		Phone Number				
Type of Travel (X)	Explanation of Business Expense					
Local	Date(s) & reason format i.e., 15-JUL-03 to 18-JUL-03 American Cancer Society Conference					
In-State						
US-Out Of State						
Foreign						
EXPENSE DISTRIBUTION BY ACCOUNT NUMBER (Detail expenses below or on Page 2)						
Entity	Department	Subcode	Purpose	Project	Reference	Total Expense
TOTALS						\$ -
Advance Date:		Less Advance Amount				
		Amount Due Payee				\$ -
		Amount Due University - Remit Univ. of Pittsburgh				\$ -
Answer The Following Questions (X):			Yes	No		
Has payee ever received a T&B payment before?						
If yes, is address the same as previous payment?						
Is this for a moving expense?						
Is there an outstanding advance?						
Is the outstanding advance for this T&B?						

Please Review Before Sending				Date Prepared	
<input type="checkbox"/> Date Prepared is the date this form was completed.					
<input type="checkbox"/> Submit typed forms only. Forms are available for download at www.bc.pitt.edu					
<input type="checkbox"/> Complete all non-shaded areas.					
<input type="checkbox"/> Account numbers must be current, active, and complete.					
<input type="checkbox"/> For multiple account numbers, distribute total expense as necessary.					
<input type="checkbox"/> Expense distribution total must equal total from 2nd page.					
<input type="checkbox"/> For advances, record Advance Date and amount on "Less Advance Amount."					
<input type="checkbox"/> Staple original receipts or exception memo to back (no paper clips)-note corresponding line number on receipt					
<input type="checkbox"/> Receipts are not required for Per Diem or mileage.					
<input type="checkbox"/> Payee and Supervisor must sign					
<input type="checkbox"/> Questions? www.bc.pitt.edu					
<input type="checkbox"/> Mail to Payment Processing 3000 CL					
Payee Is? (Put X in correct choice)		Employee	Student	Other	
Contact For	Payee	Preparer	Authorizer	How to contact? (X)	E-mail
Problems?(X)					
I attest that expenses listed here are valid and conform to the provisions established in the Travel and Business Expense Policy and expenses have not been paid through a Business Travel Request, Disbursement Request, Travel Advance or outside organization.					
Payee Signature				Date Signed	
Preparer Name			Phone	E-mail	
Authorizing Name And Title			Phone	E-mail	
Authorizing Signature				Date Signed	
For Payment Processing use only					
Auditor's Signature					
Date of Audit					

