



Office Use Only:
Charge Shortcode _____ PG _____

EXPENSE FORM FOR FACULTY AND STUDENTS

“Please attach receipts to this form and return to Tabitha Rohn”

Name _____

Event _____

Hosting Event (**attach a list of attendees**) _____

Date(s) of Event _____ TO _____

Purpose for Event _____

Requesting a Per Diem: Full _____ Partial _____ No _____

Account(s) should be charged: Research _____ Discretionary _____

Are you requesting funding from another unit to help support this event?

If so, please attach correspondence to receipts

Unit Name _____

Contact Name _____

Funding Amount _____