



Whittier College

Expense Reimbursement Report

Complete this form if you are requesting reimbursement of personal funds expended on behalf of Whittier College. Reimbursement requests for must be in compliance with Expense Reimbursement Policy.

Original Receipts Must be Attached to this Form.

Use the second page for additional detailed information.

| Date of Expenditure | Detailed Description and Purpose of Expenditure(s) | Dollar Amount | Finance Coding |
|---|--|---------------|----------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| TOTAL EXPENDITURES (This total must agree with total on page 2) | | | |



| Check Payable To (Name) | Student / Employee ID # | Are you a Student, or Employee? | |
|-------------------------|-------------------------|----------------------------------|-----------------------------------|
| | | Student <input type="checkbox"/> | Employee <input type="checkbox"/> |
| k | Signature | Date | |
| | | | |
| Budget Manager | Signature | Date | |
| | | | |
| Vice President | Signature | Date | |
| | | | |
| President | Signature | Date | |
| | | | |

Delivery Options (Select one, if no option is selected, payment will be mailed out)

Mail ACH Campus Pickup [Checks should be collected at the Business office]

I attest to the best of my knowledge and belief that the attached documentation is complete and true and that all expenses are necessary for Whittier College to conduct its mission and purpose.



Whittier College Expense Reimbursement Report

| Expense Category | Date | Dollar Amount | Project Object # |
|---------------------------|------|------|------|------|------|------|------|---------------|------------------|
| Transportation | | | | | | | | | |
| Airfare/Rail | | | | | | | | | |
| Car Rental | | | | | | | | | |
| Taxi/Limo | | | | | | | | | |
| Parking/Tolls | | | | | | | | | |
| Mileage | | | | | | | | | |
| Meals | | | | | | | | | |
| Breakfast | | | | | | | | | |
| Lunch | | | | | | | | | |
| Dinner | | | | | | | | | |
| | | | | | | | | | |
| Seminar Conference | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Other / Misc. | | | | | | | | | |
| Entertainment | | | | | | | | | |
| Lodging | | | | | | | | | |
| Laundry/Porter | | | | | | | | | |
| Phone/Fax | | | | | | | | | |
| Postal/Shipping | | | | | | | | | |
| Office Supplies | | | | | | | | | |
| Copy/Printing | | | | | | | | | |
| | | | | | | | | | |
| TOTAL EXPENDITURES | | | | | | | | | |

| | |
|---------|--|
| Address | |
| City | |
| State | |
| Zip | |