UNIVERSITY OF PENNSYLVANIA

OFFICE OF THE COMPTROLLER

GUEST TRAVEL REIMBURSEMENT WORKSHEET

This worksheet is to be used only for guest travel reimbursement where this reimbursement is the only payment received (except honoraria and awards). Suppliers and/or independent contractors billing for services or products should not use this worksheet, and should include their expenses within their fee structure according to their agreement/contract. Note: Penn Administrators - Please attach this worksheet to a completed PDA-NA or F Form. Use travel object codes 5206 (domestic) or 5207 (foreign).

PAYE	E	LAST				FIRST		MI	VENDOR #	
ADDF	RESS								-	
									"for office use only	n
PURPOSE OF TRIP OR EVENT									PHONE NUMBER	
DESTINATION(S)			BEGINNING DATE (MM/DD/YYYY)				ENDING DATE (M	M/DD/YYYY)		
	RTIFY THAT THE EXPENDITURES LIS I AM NOT REQUESTING REIMBURS				N WITH OFFICIAL U		NESS, COMPLY WI			ACCURATE AND
DATE	E (MM/DD/YY)									TOTALS (\$)
s	AIRFARE, RAIL, BUS									
z	CAR RENTAL & GAS									_
۲	PRIVATE CAR MILEAGE \$									-
2	TAXIS/LOCAL TRANSPORT.									-
⊢	PARKING TOLLS									-
PER DIEM										-
Γ	BREAKFAST									-
۷	LUNCH									-
ш	DINNER									-
Σ	REFRESHMENTS									-
LODGINGS										-
ЕR	TIPS (OTHER THAN MEAL/TAXIS)									-
O TH	TELEPHONE, POSTAGE									-
0	OTHER									-
τοτΑ	AL EXPENSES PER DAY	-	-	-	-	-	-	-	-	-
The Travel Policy recommends that forms be submitted for reimbursement within ten days of the Ending Date of the trip. Forms submitted after 6 months from the Ending date of the trip will not be reimbursed.							GRAND TOTAL - EXPENSES		-	