FLORIDA INTERNATIONAL UNIVERSITY

Travel Auth #:

Expense Report #

Reimbursement of Travel Expenses for Non-Employees

(Type information on form. Use this form for Visitors, Candidates, or Non- FIU Personnel)

Date:

PID / Vendor ID :

Payee Name:

Address:

City:

State:

Zip:

Departmental Information **(Required)**:

Activity #

Fund:

Site :

Program:

Dept#

Proj. ID:

Fund:

Site:

Program:

PC Bus. Unit:

Activity:

Notes:
You may use the following PeopleSoft Query to assist you in identifying the correct field combinations for the selected department or project; ***FIU_GL_ACT_PROJ_LOOKUP***
Non-resident alien payments require prior approval from the Controller's Office Tax compliance section.
Do not complete this form as compensation for an employee for work performed.
You must contact the Payroll Office for further instructions.
For Contracts & Grants Project ID's, you must also populate the Organizational Department ID (Org. Dept. ID) field above.

Departmental Contact Information **(Required)**:

Special Mailing Instructions **(Optional)**:

☐ Call the Departmental Contact for check pickup.
☐ Wire Transfer

Person Preparing this form:

Panther ID:

Department Name:

Location (CSC-310):

Department Phone Number:

Fax:

Required Justification

Statement of purpose or benefit expected to be derived to serve the interest of Florida International University:

ACCOUNT - DESCRIPTION	EXPENSE DESCRIPTION (Type of Expense, Hotel or Carrier Name, Etc.)	AMOUNT
-		
-		
-		
	TOTAL:	$ 0.00

APPROVALS: I do solemnly swear (or affirm) that the amounts scheduled above are just and true in all respects and were expended by the individual named for University purposes and that payment therefore has not been received.

Approved By (Signature):

Panther ID:

Title:

Date:

This person must be authorized to sign via PantherSoft Workflow Authorization on record.

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Office of the Controller
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Print Form