

Submission of this form within 30 days of travel is requested.

Portfolio 1

ndsu.acct.asc.port1@ndsu.edu
701.231.7657

Portfolio 2

ndsu.acct.asc.port2@ndsu.edu
701.231.5950

Portfolio 3

ndsu.acct.asc.port3@ndsu.edu
701.231.5926

Portfolio 4

ndsu.acct.asc.port4@ndsu.edu
701.231.4634

Name: _____ Empl ID: _____

E-mail: _____ Full Time Employee
 Student

Travel Start Date: _____ Time: _____ Travel End Date: _____ Time: _____

Destination: _____

Trip Purpose: _____

Funding Information: Fund: _____ Dept: _____ Program: _____ Project: _____

If you have more than one source of funding, please write it in the notes section at the bottom of this document.

Please check the expenses you are requesting to be reimbursed for:

- Meals
- Mileage
- Registration
- Lodging
- Rental Car - follow NDSU Policy
- Air Transportation
- Taxi/Shuttle Services
- Other: _____

If any expenses for this trip were put on a Purchasing Card, please remember to include the receipts and do NOT check the boxes above for these items.

Meals Detail: check meals to be reimbursed

Meals provided by another source, including lodging facilities or meeting/conference organizers, may not be claimed for reimbursement.

Date: _____

- | | | | | | | |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| Breakfast <input type="checkbox"/> | Breakfast <input type="checkbox"/> | Breakfast <input type="checkbox"/> | Breakfast <input type="checkbox"/> | Breakfast <input type="checkbox"/> | Breakfast <input type="checkbox"/> | Breakfast <input type="checkbox"/> |
| Lunch <input type="checkbox"/> | Lunch <input type="checkbox"/> | Lunch <input type="checkbox"/> | Lunch <input type="checkbox"/> | Lunch <input type="checkbox"/> | Lunch <input type="checkbox"/> | Lunch <input type="checkbox"/> |
| Dinner <input type="checkbox"/> | Dinner <input type="checkbox"/> | Dinner <input type="checkbox"/> | Dinner <input type="checkbox"/> | Dinner <input type="checkbox"/> | Dinner <input type="checkbox"/> | Dinner <input type="checkbox"/> |

Were expenses shared by another student or employee? If yes, please provide explanation:

Please add any additional unique information or notes we should know:

Please include all necessary documents with this cover sheet. All receipts must include payment method. Some of these items include:

- Agenda for conference/meeting or NDSU In-State Travel Agenda/Meeting form
- Hotel receipt showing payment method and zero balance
- Detailed airplane receipt showing breakdown of costs and departure/arrival times
- If claiming mileage include a map of route driven
- Detailed registration receipt for conference/meeting
- Uber/taxi receipt including map and payment method(\$5 maximum tip allowed)
- If student is being reimbursed for attending a conference/meeting, include the Payment for Student Travel form
- Include any other receipts that you are requesting reimbursement for such as baggage, parking, etc.