**Kentucky Wesleyan College**

**Travel/Event/Recruiting Detailed Expense Report**

* **All expenditures must be supported by itemized receipts (except meal allowance).**
* **Meals may be reimbursed at the College per meal allowance (include calculation of $ amount x # of days) or itemized restaurant receipts.**
* **REIMBURSEMENT - Complete this report and forward it to the Department Budget Manager within five (5) days after completion of travel/event/recruiting trip. OR**
* **ATHLETIC TEAM TRAVEL CREDIT CARD - Complete report to document expenditures incurred and forward to Department Budget Manager within five (5) days of incurring expenses and card should be returned to the Business Office immediately upon return. OR**
* **EMPLOYEE ASSIGNED CREDIT CARD - Complete report to document expenditures incurred, attach to credit card statement, and forward it to the Department Budget Manager within five (5) days of receipt of credit card statement.**

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| --- | --- |
| **Employee Name:** | **Department Name:** |
| **Fund and Department Account Number (6 digit):**  **(XX – XXXX)** | **Travel Destination/Location (if applicable):** |
| **Date and Time of Departure (if applicable):** | **Date and Time of Return (if applicable):** |
|

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Purpose:** | **** | **Conference** | **** | **Student Recruiting** | **** | **Professional Meeting** | **** | **Athletic Competition** | **** | **Other:** |

 |
| **Trip/Event Description (name of conference/meeting/competition/event or persons being recruited or attending meeting):** |

**SUMMARY OF EXPENDITURES (detailed receipts attached by category in date order)**

|  |  |
| --- | --- |
| **Meals – Faculty & Staff (daily allowance or detailed receipts) (line item 61500)** | **$** |
| **Meals – Team/Group Allowance (attach completed form with signatures) (line item 61500)** | **$** |
| **Transportation – Description (line item 61600)** | **$** |
| **Lodging – # of Nights (line item 61550)**  | **$** |
| **Other Expenses – Description** | **$** |
|  **Total Expenditures**  | **$** |
|  **Amount Previously Advanced for Trip/Event (if applicable)**  | **$** |
|  **Reimbursement to Employee (less amount advanced)** | **$** |
|  **OR Total Amount Charged to College Credit Card** | **$** |

**I certify that these charges incurred by me for college business are within the College’s Business Policies and Procedures.**

|  |  |
| --- | --- |
| **Signature of Employee:** | **Date:** |
| **Signature of Department Budget Manager:** | **Date:** |
| **Signature of College Officer:** | **Date:** |