



PORTLAND STATE UNIVERSITY

American Association of University Professors

Promoting Quality Higher Education - An Investment in Oregon's Future

Member Travel Expense Reimbursement Form 2018

Name: _____

Event: _____ Date: _____

Description	Amount	Total	Policy 02 Allocation Category <i>(leave blank)</i>
Conference Fees			
Travel:			
Plane Fare			
Ground Transport			
Hotel			
Car Rental			
Gas			
Personal Car (\$.545/mile)* *2018 IRS.gov			
Meals			
Breakfast			
Lunch			
Dinner			
Incidental expenses			
Other Expenses:			
Total Reimbursement Due:		\$	

(Reimbursement Checks will be mailed to your home address of record)

I incurred the above expenses on behalf of PSU-AAUP. These expenses were pre-approved and are reimbursable. I request reimbursement for the amount indicated.

Signature: _____ Date: _____

Authorized by: _____ Date: _____

Please attach original receipts (Tape small receipts face up on 8 1/2 x 11 sheet). Thank you!

Please do not staple