



Cornell University Payment and Tax Services

Travel Reimbursement Request

Date

Payee's Last Name Payee's First Name Unit Name

Relationship to Cornell (check one please) Cornell Employee Cornell Student Other Please describe Campus Address

Home Address City/Town State/Province Country Zip/Postal Code

Business Purpose of Trip/Expenditure (required)

LEFT FROM **ON** **TO** **HOME ON**
(Location) (Date) (Location) (Date)

Lodging	(Room costs only, enter meals, incidentals and miscellaneous below)		TOTALS	<input type="text"/>
Meals	(Check one - method selected must apply to entire trip) <input type="checkbox"/> Per Diem Method OR <input type="checkbox"/> Receipt Method	\$ -		
	Alcohol/Bar Costs (Business Meals & Receipt Method only)			
	Hosted Business Meals (Provide details on next page)			
Meals total				<input type="text"/>
Transportation				
Airfare (including travel agent/booking service fees)		\$ -		
Auto Rental & Gas				
Tolls & Parking				
Train, Bus, Taxi, Limo				
Personal Auto	Miles @ \$ 53.5 cents			
	IRS rate			
Transportation total				<input type="text"/>
Miscellaneous (please explain)				<input type="text"/>
				<input type="text"/>
	TOTAL EXPENSES			<input type="text"/>

You must be currently enrolled in AP Direct Deposit to select this payment method for this reimbursement.
[Sign up for AP Direct Deposit for future reimbursements.](#)

Less advances*	<input type="checkbox"/> Direct Deposit
Amount Due Payee	<input type="checkbox"/> Campus Mail (addr. above)
Amount Due Cornell	<input type="checkbox"/> US Mail to home
*Advance Acct. #	<input type="checkbox"/> Day Hall Pickup (name/ext)
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NOTE: You may NOT code expenses to Endowed and Contract College accounts on the same voucher.

Bps	Account Number	Object	Project	DUO	Amount	1099	
						Code	Amount
	-						
	-						
	-						
	-						
Total (must equal Total Expenses above)					\$	-	

Payee Certification & Approvals
I certify that these charges are accurate and that I am not claiming reimbursement from another source.

Payee Signature _____ Date _____ Prepared by: _____ E-mail _____ Ext _____

Signature Authority Approval _____ Date _____ Enter/Print Name _____ E-mail _____ Ext _____