

Tracking Number (for office use):EX _____

Seminar Speaker Reimbursement Form

Traveler: _____

Dates: From ____/____/____ to ____/____/____

1st Acct. Number: _____

2nd Acct. Number: _____

Airfare

Airline/Agency*	Seating Class	Method of Payment	Amount
			\$

Lodging

Name of Hotel(s)	# of Days	Method of Payment	Total Amount
			\$

Rental Car

Car Rental Agency	Size of Car*	Insurance?	Method of Payment	Amount
				\$

*Note: An explanation is required for Luxury or Full-sized cars: _____

Other Expenses (conference registration fees, shuttle, parking, taxi, etc.)

Expense	Method of Payment	Amount
		\$
		\$

Meals Non Per Diem

Receipts attached	Method of Payment	Amount
		\$
		\$
		\$

Department Vehicle & Personal Vehicle Charges

Expense	Method of Payment	Amount
DB01 DB02 DB03 (circle one) _____ miles x _____ ¢ per mile		\$
Personal Vehicle Miles _____ miles x _____ ¢ per mile		\$

Grand Total	\$
Less Above Amounts Charged Directly to BYU Account Number	\$
Less Above Amounts Charged _____ P-Card	\$
Less Above Amounts Charged _____ P-Card	\$
Balance Due Claimant OR Amount to be deposited at Cashier's Office	\$

Address: _____

Speaker's Signature _____

Date: ____/____/____

Proxy Signature _____

Date: ____/____/____

Department Financial Manager _____

Date: ____/____/____

Department Chair _____

Date: ____/____/____