

UNIVERSITY OF FLORIDA FOUNDATION, INC.
POST OFFICE BOX 14425
GAINESVILLE, FL 32604

EMPLOYEE EXPENSE REPORT
SUBMIT TO:
UF FOUNDATION DISBURSEMENTS DEPARTMENT
392-9882

UFID #:

Employee Name:

Expense Report #:

Destination:

Source of Funds #: F

Departure Date:

Return Date:

Departure Time:

Return Time:

Business Purpose / Benefit to UF: (If traveling with another employee identify that person below).

I certify the above expenses are valid and for the benefit of the UF. I also certify reimbursement for these expenses is not being requested from another source. If this request is for prepaid expenses, I agree to provide receipts for all reasonable expenditures for which this prepayment is being made within ten (10) calendar days of the expenditure or completion of travel. I also promise to reimburse the Foundation for any portion of this prepayment, which is not properly spent and/or properly receipted

Employee Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Print Approved by Name: _____

Prepared By: _____ **Email:** _____

Campus Address: _____ **Phone:** _____

EXPENSE TYPE **DATE** **MERCHANT** **AMOUNT**

MILEAGE: # of Miles: X UF Mileage Rate*:

Reimbursement for meals from attached Worksheet ** **Meals Total**

Go to UF directives and procedures/Travel Finance & Accounting Travel (8, 9, 16) for the University's current *mileage & **meal reimbursement rates.

Subtotal of Amount Due To Employee

Less prepaid travel expenses **included in above list** (attach blue form and requested documentation) ()

Total Due To Employee

**TRAVEL EXPENSE REPORT (ATTACHMENT)
REIMBURSEMENT FOR MEALS
WORKSHEET**

Traveler:

Effective for all travel as of July 1, 2007, the following amounts for meals are allowed while traveling on official UFF business: (Note meals on day trips are not reimbursed)

Breakfast **\$6** When travel begins before 6 AM and extends beyond 8 AM
Lunch **\$11** When travel begins before 12 Noon and extends beyond 2 PM
Dinner **\$19** When travel begins before 6 PM and extends beyond 8 PM
Total **\$36** Per Day

	<u>Breakfast</u>	<u>Lunch</u>	<u>Dinner</u>	
Day 1				Total:
	(mm/dd/yyyy)			
Day 2				Total:
	(mm/dd/yyyy)			
Day 3				Total:
	(mm/dd/yyyy)			
Day 4				Total:
	(mm/dd/yyyy)			
Day 5				Total:
	(mm/dd/yyyy)			
Day 6				Total:
	(mm/dd/yyyy)			
Day 7				Total:
	(mm/dd/yyyy)			
Day 8				Total:
	(mm/dd/yyyy)			
Day 9				Total:
	(mm/dd/yyyy)			
Day 10				Total:
	(mm/dd/yyyy)			

Total Meal Reimbursement: