

Employee Travel & Expense Cover Page ExpenseReports@umich.edu

734-615-2000

Employee Travel & Expense Cover Page

Please note that fields are not character limited, however only visible characters will come through to the SSC. Enter additional comments in the notes section, or attach another sheet of paper to this form.

		in the no	ites section, or a	ttach another sheet of paper to this forn
Employee Information:				
Uniqname:		Approver Uniqname:		
Cash Advance Amount:		Shortcode:		
Dates to Exclude from Per Diem:		Type of Travel:		
Purpose of Trip (Who, What, Why):				
Outbound Travel:				
Departure Location:		Date:		
Avrival Location		Time:		
Arrival Location:		Date: Time:		
Return Travel:		Tillie.		
Departure Location:		Date:		
Departure Location.		Time:		
Arrival Location:		Date:		
		Time:		
Per Diem: If you wish to claim Per Diem, pleas	se list date	e() at left, and c	heck the boxe	es below to exclude a meal.
List Date(s) Below: Breakfast		Lunc	:h	Dinner
Additional Expenses:	Dollar	Amount:		Select Payment Type:
Departure baggage fee(s)				
Return baggage fee(s)				
Lodging				
Conference registration				
Car rental, fuel				
Select if rental is a university vehicle	U of M Vehicle			
Ground transportation				
Parking	Colocti	0: 14/	Day on al Taile	One Way Mileage total
Mileage to/from airport Other (describe in notes):	Select:	One Way	Round Trip	One-Way Mileage total:
Other (describe in notes).				
Please a	ittach al	I required re	ceipts	
NOTES:				

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