

Employee Travel & Expense Cover Page

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Please note fields are not character limited. Only visible characters will come through to the SSC. Enter additional comments in the notes section, or attach another page to this form. Revised 1/2019

Uniquename	Approver Uniquename:								
Shortcode(s) to Charge:				Cash Advance Amount:					
Purpose of Trip (Who, What Why):									
		,,,.							
Outbound Ti	ravel:								
City/State:				Date:	Date:			Time:	
Arrival City/St	ate:	Date		ate:		Time:			
Return Trave	el:								
City/State:			Date:			Time:			
Arrival City/St	ate:		Date:	Date:		Time:			
Per Diem: If y	ou wish to claim P	er Diem, choose	an option below	– or – list date	es then <mark>ch</mark>	eck the box to e	xclude a provid	led meal	
Stan	ndard/All Meals	Dinner Only		No Meals		Specific – Listed Below			
	dates in addition					Breakfast; L = Lunch; D = Dinner			
Dates:	В	L	D	Dates:		В	L	D	
				- ()					
Additional E	xpenses:		Dollar Amo	unt(s):	Othe	r Info:	L	P-Card?	
Airfare	f(a)				-				
	ge fee(s)				_				
Lodging	ristration								
Conference Reg	or rental car fuel								
Car rentar and/	or rental car luer	University Vehicle?		Enter UM Vehicle #			n/a		
Ground transpo	ortation (Uber, Tax	University vehicles		Effici Olvi Vefficie #			II/a		
Parking	Ji tation (<i>Ober, 10</i>)	u, ell)							
Mileage to/fror	m airnort	One-Way	Roundtrip				n/a		
Train	Than port		One way	Roundinp				11/4	
17diii	D	lease enter an	y other inform	nation in th	e Notes	Section helas	V		
		hat "Hosted N	-						
Please attach all receipts required by your department & the UM SPG									
NOTES:									