

Name: _____

Home Address: _____

Telephone/Extension: _____

City: _____ State: _____ Zip: _____

Employee ID or UVID: _____

Certification of Expenses: I certify this expense report is a true and accurate accounting of expenses incurred on authorized University or grant approved business. In addition, they are fair charges against Loyola University Chicago and for all expenses chargeable to Federal or State grants, this request excludes alcohol. Amounts not approved or considered excessive by the University are authorized to be deducted.

Expense Summary and Distribution of Expenses

Total Expense	
Advance	
Total Reimbursement due to/from:	
Reimbursement due to Employee:	
Select a Re-payment Method	
Balance due to Loyola University:	
Select a Re-payment Method	

I certify that expenses paid via a University ProCard are NOT included on this reimbursement request

Business Reason for Expense / Comments

NAME OF CONFERENCE
LOCATION
DATES
If being reimbursed for mileage: Start Address End Address

Accounting Unit	Account	Activity	Account Category	Total Distribution
Total Distribution				

Approvals

	Name	Date
Requestor Name (print)		
Requestor Name (signature)		
Budget Administrator (print)	Ext:	
Budget Administrator (signature)		
Supervisor/Secondary Approver (print)	Ext:	
Supervisor/Secondary Approver (signature)		
Finance Use Only		

Please return all completed forms including all supporting documentation to:
Assistant Dean of Student Academic Services
Lewis Towers, Room 1010, Water Tower Campus. Please contact Nancy Goldberger, Assistant Dean at 312-915-6318 with any questions.