NON-EMPLOYEE TRAVEL REIMBURSEMENT FORM

This form is **required** to be completed by all non-employee travelers. NOTE: Per Diem rates in SAP Concur are more precisely calculated than on this form. Your reimbursement amount may vary from the amount calculated here. The calculations on this form are estimates.

Traveler's Name: _____

Complete Mailing Address: _____

Daytime Phone #: _____

E-mail Address: _____

Business Purpose: _____

Notes: _____

Non-Employee must declare residency status by checking the appropriate box:

- ☐ Non-Employee is a United States Citizen (no additional documentation required)
- ☐ Non-Employee is a Permanent Resident - Non-Employee Information form required.
- ☐ Non-Employee is a Resident for Tax Purposes - Non-Employee Information form required.
- ☐ Non-Employee is neither a United States Citizen, nor a Permanent Resident, nor a Resident for Tax Purposes - (Non-Employee Information form required, as well as all required documentation to authorize payment as defined on the Non-U.S Citizen Payment Guidelines).

Departure			Arrival		
Location	Date	Time	Location	Date	Time

In the table below, line 1 will automatically adjust to reflect the GSA 75% 1st Day of Travel Per Diem rate. Your last day of travel will be manually adjusted to reflect the Last Day of Travel 75% Per Diem rate.

			Daily Meal Per Diem		Meals Provided by Host (Exclude)				
Dates	Location	# of Days	Meals	Inci-dentals	All Meals	Break-fast	Lunch	Dinner	Total Per Diem
									$ 0.00
		1							$ 0.00
		1							$ 0.00
		1							$ 0.00
		1							$ 0.00
							Total Meal Per Diem		$ 0.00

To determine the Daily Meal Per Diem rate see U.S. General Services Administration Per Diem - CONUS or Department of Defense - OCONUS

Receipt Required?	Unallowable F&A*?	Expense Type	Amount
Yes		Airfare (if paid with personal funds)	
Yes		Other Long Distance Transportation: Bus / Trains	
No		Local Metro / Subway / City Bus / Tolls	
No		Mileage (if personal vehicle) _____ Miles @ _____ cents per mile	
Yes		Rental Car	
Yes		Fuel (rental car only)	
Yes		Taxi / Shuttle / Limo	
Yes		Parking	
Yes		Lodging	
No		Meal Per Diem (from above)	
Yes		Other (please list):	
*See Policy RA30 Facilities and Administrative (F&A) Costs for complete details		**Total**	$ 0.00
Travel Expenses Not Reimbursed by PSU			( )
Amount Due Traveler			$ 0.00

SAP Concur Report Header Allocation(s) **(dollar amounts must equal "Amount Due Traveler" above or % must equal 100%)**

Business Area	Cost Object Type	CC/IO/WBS #	CC/IO/WBS Name	Amount or %
	Select Answer			
	Select Answer			
	Select Answer			

If more entries than the above table, create a spreadsheet, using the same formatting, and submit along with this form.

By submitting this expense report, I hereby certify that the expenses claimed herein are a true, accurate, and complete representation of the necessary business-related costs incurred during this business trip. I further attest that no personal or unallowable expenses have been included, and that I have not received, nor will I seek, reimburse-ment for these expenses from any other source. Additionally, none of the expenses claimed have been previously paid or reimbursed by another entity.

Traveler's Signature _____ Date _____

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