

**ECBYTES / EMPLOYEE EXPENSE REIMBURSEMENT FORM**

|   |  |  |                                 |  |  |                                       |  |  |                       |  |  |
|---|--|--|---------------------------------|--|--|---------------------------------------|--|--|-----------------------|--|--|
| Name:                                       |  |  | Dept. Name:                     |  |  | Encumbrance #                         |  |  | Ecbytes Use Only      |  |  |
| Business Vendor Number:                     |  |  | Dept. Contact:                  |  |  | Final Payment?                        |  |  | Banner Document #     |  |  |
| Remittance Address (insert on lines below): |  |  | Phone:                          |  |  | Transportation purchased with P-Card: |  |  | Address Sequence:     |  |  |
|   |  |  | Method of Transportation:       |  |  | Amount:                               |  |  | Address Code:         |  |  |
|   |  |  | is lodging conference hotel?    |  |  | P-Card Transaction # :                |  |  | Check Print Location: |  |  |
|   |  |  | is exception included in total? |  |  | Travel Advance Amount                 |  |  | Headquarters:         |  |  |

  

| Date                         | Departed From/<br>Arrived At | Time | # of<br>Auto<br>Miles @<br>\$ 0.36 | Transportation             |                   |                   | Lodging           | Meals or<br>Per Diem | Misc.<br>Expense  | Daily<br>Totals |
|------------------------------|------------------------------|------|------------------------------------|----------------------------|-------------------|-------------------|-------------------|----------------------|-------------------|-----------------|
|                              |                              |      |                                    | Auto<br>Reimburse-<br>ment | Air, Rail, Etc.   | Car Rental        |                   |                      |                   |                 |
|                              |                              |      |                                    | Auto Calculate             | Amount in U.S. \$ | Amount in U.S. \$ | Amount in U.S. \$ | Amount in U.S. \$    | Amount in U.S. \$ | Auto Calculate  |
|                              |                              |      |                                    |                            |                   |                   |                   |                      | Desc:             | \$ -            |
|                              |                              |      |                                    |                            |                   |                   |                   |                      | Desc:             | \$ -            |
|                              |                              |      |                                    |                            |                   |                   |                   |                      | Desc:             | \$ -            |
|                              |                              |      |                                    |                            |                   |                   |                   |                      | Desc:             | \$ -            |
|                              |                              |      |                                    |                            |                   |                   |                   |                      | Desc:             | \$ -            |
|                              |                              |      |                                    |                            |                   |                   |                   |                      | Desc:             | \$ -            |
|                              |                              |      |                                    |                            |                   |                   |                   |                      | Desc:             | \$ -            |
|                              |                              |      |                                    |                            |                   |                   |                   |                      | Desc:             | \$ -            |
| <b>Total Travel Expense:</b> |                              |      |                                    | \$                         | \$ -              | \$ -              | \$ -              | \$ -                 | \$ -              | \$ -            |

  

|                                  |   |
|----------------------------------|---|
| Destination and Purpose of Trip: | Total Miscellaneous Expenses            |
|                                  | <b>TOTAL TRAVEL &amp; MISC. EXPENSE</b> |
|                                  | Less Travel Advance Doc. #              |
|                                  | <b>Total Due To/(Owed by) Employee</b>  |
|                                  | \$ -                                    |
|                                  | \$ -                                    |
|                                  | \$ -                                    |

  

| Date         | Description | Amount |
|--------------|-------------|--------|
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
| <b>TOTAL</b> |             | \$ -   |

  

|                     |             |   |
|---------------------|-------------|---|
| Employee Signature: | Date:       | Instructions:   |
|                     |             | 1. Attach original paid receipts for all hotels, registrations, and miscellaneous reimbursable items. |
|                     | Approval:   | 2. Attach customer copy of Air, Rail, or Train tickets  |
|                     | Ecbytes Inc |   |