

## Non-Employee Travel Expense

** For AP Use Only **	
Banner Invoice #	

		l for non-employees to and International). No						
Date:	ate:			Encumbrance No.:				
				Banner ID #:				
Mailing Address:								
State:Zip:				Department Name:				
Travel Destination:(City & State)			Dates of Travel:					
Conference Name:			Purpose of Trip:					
Section 2: Descri	iption of Expense	es (For more informati	ion please vi	sit: Travel Policy)				
Date(s)	Items		iption of Expen	se (In Detail) Registration, Airline name)	Miles Only	2023 IRS Mileage Rate	Line Totals(s)	
		(Examples: Hotel ha	me, comerence	, Registration, Annue name)	Olly	.655		
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Federal Per Diem Rat	es: <u>US per diem rates</u>	registration fee are deducted in Foreign per diem Rates		(Please at		Grand Total:	L	
Section 3: Account Information (Account # 7215 for mil  Index # Fund # Organiza		Organization #	Account # 7216 for all other travel expenses and employ.  Account #		Program		Approved Amount \$	
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	the travel and expe	Travel Expense form renses indicated hereon, whabove:						
Traveler Signatur	e:				Date:			
Section 5: Appro	priate Approval	ls (Print and Sign)						
Department Head	/ Dean:				Date:			
Grants:					Date:			
Accounts Payable	e:				Date:			