

INSTITUTE for ADVANCED STUDY

REQUEST FOR TRAVEL REIMBURSEMENT

NAME:

ADDRESS:

EMAIL:

DESTINATION:

DATE:

PURPOSE OF TRIP:

I. EXPENSES

Out-of-Pocket Expenses

Airfare		\$
Trainfare		\$
Private Car	mi. @ 70¢/mi	\$
Rental Car		\$
Parking		\$
Taxi/Limo		\$
Accommodation		\$
Meals		\$
Registration Fees		\$
Tolls		\$
Other		\$

Total Out-of-Pocket Expenses \$

II. REIMBURSEMENT METHOD: Direct Deposit ** Paper Check
(US Dollar Accounts Only)

** For Faculty, staff and members at IAS for longer than 60 days: I certify bank account information on file with Accounts Payable is still current (initial)

** All others requesting direct deposit: You must complete and attach Direct Deposit Request form which is located at www.ias.edu/campus-resources/working-at-ias/comptrollers-office/online-forms

If you do not complete and attach form you will receive paper check.

III. CHARGE TO ACCOUNT:

Signature of Traveler

Date

Supervisor or Authorized Signatory

Date