

Official Recruiting Visit Request for Reimbursement

Section A - RI	EQUES1	OK									
Request Date				Sport							
Coach						Phone	2	I	E-Mail		
OV# (From top of f	form PUR-120)										
Section B - PA	YEE IN	FORM	ATION								
Vendor ID#											
Prospect Nam	ne										
Dates and times of Travel			Start					End			
Travel Start Location			•					•			
Section C - IT	EMIZE	D REIM	1BURSA	ABLE	EXPEN	SES					
Original itemized	receipts for	all claimed	l expenses	must be	attached fo	or reimbu	ırsement. Or	nly includ	e items directly paid	by the i	individual.
Expense			Quantity				Amou	ınt			
Airfare											
Mileage* @ \$ (current state rate)			Miles						*Digital map showing miles traveled MUST be attached.		
Lodging** @ \$/day									**This line is for room charges only, not food/ incidentals. Do not include amounts directly paid by the University to the lodging facility.		
Meals*** (Mark the number of each meals for reimbursement.)			Number of Meals Breakfast Lunch Dinner						***List of attendees MUST be attached.		
Entertainment**								**** Explanation of each claimed expense is required to be clearly outlined and attached.			
Misc. Itemized Expenses *****									*****Attach additional page for itemization.		
Less Cash Advanced			TA#								
			Tota	l Rein	nburseme	ent					
Section D - A	CCOUN	TING									
Fund	Or	g	A	ccount]	Program		Activity		Amount
										+-	
Section E - AP	PROVALS	<u> </u>		-	-	s claimed fe	or reimbursemen	t on this requ	uest were paid with person	al funds a	nd incurred while on
Department				University		nature	Printed Name		Printed Name		Date
Head Coach											
Athletics Complian	nce										
Assistant AD for Business											
Director of Athlet	ics or Desig	gnee									
Comptroller											
President											
Director of Purcha	asing										
Vice President of Administration & Finance											