HOFSTRA-AAUP BUSINESS EXPENSE REIMBURSEMENT FORM

Name of Hofstra-AAUP Individual Seeking Reimbursement:

Name _____ Position/Title _____

Address:

Business Purpose:

Dates of Travel
(if applicable):

Itemized Expenses:

Date	Description	Cost
	Total Expenses:	
	LESS: Advance	0
	Amount Due	

-All expenses must be documented by original receipts which are attached to this form.
(credit card receipts, which do not provide itemized purchases, are not sufficient. Itemized receipts must be provided in order to be reimbursed).
-Receipts should be attached to an 8 1/2 x 11 piece of paper in chronological order.

Signature of Hofstra-AAUP Employee/Board Member/Other Hofstra-AAUP Member **Date**

Treasurer's Approval Signature **Date**
(not applicable if the Treasurer is the individual applying for reimbursement.)
The President must approve all reimbursement requests when the Treasurer is the individual seeking reimbursement.
If the Treasurer's request exceeds $300, one of the Vice Presidents must also approve the request.

President's Approval Signature **Date**
(required if total expenses exceed $300 and/or the Treasurer is the individual seeking reimbursement)

Vice President's Approval Signature **Date**
[necessary if the Treasurer is requesting a reimbursement in excess of $300 or if the President or Treasurer submit a reimbursement request for charges involving both the Treasurer and President (such as a business lunch)].

The above polices and procedures were approved by the Hofstra-AAUP Executive Council on March 9, 2016.