

****Please return to:****

TRAVEL EXPENSE REPORT

Pathways to Prosperity Partnership
c/o Department of Psychology
Social Science Centre
Western University
1151 Richmond Street
London, ON N6A 5C2



For NON-WESTERN Individuals Only
(WESTERN Employees must use the online
Travel and Expense Center at finance.uwo.ca)

~~Western University~~
~~Department of Financial Services~~
~~Suite 6100, Support Services Building~~
~~London, Ontario N6A 3K7~~
Travel@uwo.ca

Shaded areas are for Department of Financial Services use only

Invoice # E	Vendor # 9	Date: YYYY MM DD	Reference Description
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Claimant's Name, Last	First	Initial
Faculty / Department / Street Address		
Room Number / Building / City		
Province / State	Postal / Zip	Phone Number
Email Address	Currency	

Graduate Student: Yes No

Research: Yes No

Special Instructions:

Cheque Handling

ITINERARY (Mandatory)

Purpose of Travel or Expense (required):

Location:

Dates:

INSTRUCTIONS:

1. Complete the top part of this page by indicating your name and department address (or home address).
2. On Page 2, complete the expense categories A through D as applicable.
3. Complete Section E on Page 3 if you have any Cash Advances or if any expenses were paid directly by the University.
4. Convert all foreign/US amounts to Canadian currency using the exchange rate at the time the expenses were incurred.
5. Allow 3-5 working days for processing the claim.

Total Expenses (from page 2)

①	\$
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Total Advances/Direct Expenses
(from page 3)

②	\$
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① - ② =

Returned to Western
\$

Due to Claimant
\$

\$1.00 is neither paid nor refunded

EXPENSE CATEGORIES

A. Transportation

Date From		Date To		Description (for car use show km x rate)	Receipt Total	Deduct Personal Expenses included	Currency Exchange	Claim Amount
							Total of A	\$
Amount	Speed Code	Account #	Fund	Dept/Org	Program	Project/Grant		

B. Accommodation

Date From		Date To		Description	Receipt Total	Deduct Personal Expenses included	Currency Exchange	Claim Amount
							Total of B	\$
Amount	Speed Code	Account #	Fund	Dept/Org	Program	Project/Grant		

C. Meals & Business Hospitality

Date From		Date To		Description	Receipt Total	Deduct Personal Expenses included	Currency Exchange	Claim Amount
							Total of C	\$
Amount	Speed Code	Account #	Fund	Dept/Org	Program	Project/Grant		

D. Supplies/Subject Fees/ Misc

Date From		Date To		Description	Receipt Total	Deduct Personal Expenses included	Currency Exchange	Claim Amount
							Total of D	\$
Amount	Speed Code	Account #	Fund	Dept/Org	Program	Project/Grant		

Total Expenses: A + B + C + D
(Carry forward to page 1)

\$

①

GENERAL GUIDELINES

1. Please ensure that all claims for expenses are in accordance with University Policy
2. A copy of the Travel & Expenses Reimbursement Policy 2.16 can be found at www.uwo.ca/finance/travel and includes a link to the new Travel & Expenses Reimbursement Procedures. These documents provide the current Mileage Rates and Meal Guidelines
3. Invoices for supplies that exceed \$500 or equipment that exceeds \$2,000 should be paid through the Purchase Order System
4. Please attach all receipts and include an explanation for any of the following items:
 - Missing receipts (**attestation form required**)
 - Airfare that exceeds Economy Rate
 - Room rates in excess of the Basic Rate
 - Meal receipts that exceed the guidelines
5. Additional resources and forms can be found on the Financial Services website: www.uwo.ca/finance

E. Cash Advances / Prepaid Costs (see Section 13.0 of Travel & Expense Reimbursement)

1. **Section E should be completed if you have obtained a Cash Advance or if you have used a Purchase Order to pay for airline or train tickets** (and the order was charged to the 645100 account). The expense should be included in the appropriate category on Page 2, and the amount of the account charges on the Purchase Order must be shown in this section.
2. Tickets obtained through Western's Preferred Travel Agencies should not be recorded in this section. However, the original documentation should be included with the Expense Report for audit purposes.

Date: YYYY MM DD	P.O. # / Advance #		Description			
Amount	Speed Code	Account #	Fund	Dept/Org	Program	Project/Grant
Amount	Speed Code	Account #	Fund	Dept/Org	Program	Project/Grant
Amount	Speed Code	Account #	Fund	Dept/Org	Program	Project/Grant

Total of E <i>(Carry forward to page 1)</i>	\$
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②

STAPLE RECEIPTS HERE

EXPLANATION OF POLICY / PROCEDURE EXCEPTION(S)

APPROVALS *(Expense reports missing Approval Signatures will be returned)*

CLAIMANT:

I certify that all expenses submitted are reasonable and in accordance with university policy and will not be used as claims to other organizations for income tax purposes. Expenses reflect due regard for value for money, and personal expenses have been deducted. Exceptions to policy have been explained in writing and outstanding Cash Advances and prepaid expenses have been accounted for.

Print Name:

Signature:

Date YYYY MM DD:

ACCOUNT HOLDER / PRINCIPAL INVESTIGATOR (Research Projects Only):

I certify that these expenses are in accordance with the budget of research project and they adhere to the policies and procedures of the granting agencies).

Print Name:

Signature:

Date YYYY MM DD:

BUDGET UNIT HEAD/DESIGNATE:

I certify that the expenses are for University purposes only, and are in accordance with University policy. Exceptions to the Policy, which are documented by the Claimant, are reasonable under the circumstances.

Print Name:

Signature:

Date YYYY MM DD: