## **FACULTY & STAFF REIMBURSEMENT REQUEST**

Please place this cover sheet and all required supporting documents in a sealed envelope so items do not get lost/separated.

NAME	EmployeeID#
MILEAGE REIM	<u>IBURSEME</u> NT
*The UA usesGoogle Mapsas the official calculations  *Exact addresses fodeparture and fi  *Reimbursement is allowable for mileage of	nal destination are required.*
Date & Address of Departure (if you departed from	om home, please use this address)
Date & Location of Destination	
Business Purpose for Expense (Conference/ Wo	orkshop/ Speaking Invitation)
Website hyperlink for Business purpose (Conference/ Workshop/ Speaking Invitation)	
Account to process payment from (if known)	
Supporting Documents Required	

