



ONE DAY TRAVEL - MEAL REIMBURSEMENT REPORT

SRFC Document #
Voucher Number <small>Acctg Operations only</small>

Employee Submitting the Travel Support Form: _____

Date meal charges occurred: ____/____/____

(Print/Type LAST Name First)	PSU ID	MEAL* CHARGES	BUDGET CHARGED	FUND CHARGED	EMPLOYEE SIGNATURE

Additional University employees whose meals appear on the above employee's Travel Support Form:

1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

INSTRUCTIONS:

- To be signed by each employee who is provided meals.
- Must be submitted with the *Travel Support Form* of the employee requesting reimbursement.

* These amounts will be added to "Wages, Tips, and Other Compensation" on Form W-2 in compliance with Internal Revenue Service Procedure 80-53.

