Visitor's Expense Report An electronic VER is available, see the Online Voucher in the NUPortal		Department: Dept Code: Request Date: Dept. Contact: Phone:		Request #:	Request #: Voucher #: Visitor		
				Voucher #:			
				Visitor			
UNIVERSI	UNIVERSITY		Email:		Vendor Code:		
VISITOR: Please Compl	ete this Section		Original rece	eipts must be submit	ted for all claime	d expenses	
Visitor Name:			Business Purpose:				
Address:							
City, State ZIP:							
Phone:							
Date(s) of Travel or Exp	ense From:	To:					
Expense Item	Description, Doc	umentation Requirements	Explanation of Expense		Amount		
Air	Coach rate; attach c	original passenger receipt					
Rail	Attach original passenger receipt						
Ground Transportation	Taxi, etc., attach ori	ginal receipts and include tip					
Automobile	Enter Mileage incurred on or before 12/31/2015: Enter Mileage incurred on or after 1/1/2016:		@ 0.575 per mile:@ 0.540 per mile:	Parking Total:	Tolls Total:		
Other Transport	Rental car, etc.				·		
Hotel Room & Tax	Attach original hotel	voucher					
Meals	Attach original receipts, dinners may not exceed \$65 per night, incl. tax and tip						
Incidentals	Attach original receipts, gratuities & other misc. items						
Non-travel Expense #1							
Non-travel Expense #2							
Non-travel Expense #3							

VISITOR: Certification Signature Required

I certify that I have paid out these amounts for Universityrelated activities in support of the business purpose listed and in accordance with University policies and procedures, that sponsored project expenses contain no charges for alcoholic beverages or other unallowable items, and that I have not previously received nor will I receive separate reimbursement from Northwestern University or any other entity for any charge I am submitting on this form.

NORTHWESTERN UNIVERSITY USE ONLY Chartstring Distribution								
	Fund	Department	Project	Activity	Program	CF1	Account	Amount

Total Expense

Dean or Supervisor Area(s) Approval Required

I certify that these expenses were incurred for University related activities and approve them as proper charges to University accounts

Date					
	Print Name(s)	Signature(s)	Date		
Visitor Signature					

Revised 1/1/2016