

New York-Presbyterian Employee Business Expense Report

(Original receipts required. Please tape side-by-side on 8.5 x 11 paper & attach to this report.)

NYP POLICY B106

Revised: March 2017

Date: _____

Name: _____ Dept.: _____

Telephone: _____

Home address: _____

Zip Code: _____

NYP Employee ID# : _____

Company:

*Cost Center:

Charge

Account

I. Summary of Employee Business Expenses

A. Reimbursement for mileage (no receipt)

						TOTAL	
Auto Allowance	# Miles	<input type="text"/>	x \$Rate	\$0.535	= Mileage	<input type="text"/>	71770

B. Reimbursement for travel expenses (attach receipts)

Plane / Train / Car Rental	<input type="text"/>	71770
Taxi / Public Transportation	<input type="text"/>	71770
Tolls, Parking	<input type="text"/>	71770
Lodging (Attach receipt from hotel)	<input type="text"/>	71770

C. Reimbursement for food and entertainment (attach receipts with list of attendees and business purpose)

Meals	<input type="text"/>	71150
Entertainment & Celebration Events	<input type="text"/>	71150

D. Reimbursement for other business and travel expenses (attach receipts and business purpose)

Other - specify: <input type="text"/>	<input type="text"/>	70700
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TOTAL EXPENSE

II. Payee Attestation

I certify that this report has been completed in conformity with the NYP Business Expense Reimbursement Policy and accurately describes the actual and necessary business expenses incurred in compliance with NYP policies unless specifically noted. I have not received reimbursement for these expenses from any other entity.

Employee Signature: _____

Date: _____

III. Authorization

Approvers must be senior to the payee and in accordance with the approval matrix presented in the NYP Business Expense Reimbursement Policy.

Signature: _____

Print Name: _____

Title : _____

Date: _____

* **Note:** Restricted / Specific Purpose Funds require additional approvals and processing. See the NYP Infonet Finance website for policy.