

# BIOLOGY ADMINISTRATION FINANCIAL SERVICES

For Office Use Only

Request for  TRAVEL  ENTERTAINMENT  T&E Card Reimbursement

|                      |
|----------------------|
| TR:                  |
| FAU:                 |
| Amount: \$           |
| Fund Mgr. Signature: |
| PI Signature:        |

Name of Requestor: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Are you a UCLA:  Guest/Student  Active Employee (9-digit UID: \_\_\_\_\_)

If Guest/Student, please select Preferred Method of Payment:  Zelle (Electronic Transfer)  Mailed Paper Check

If opting for Zelle, is the Zelle account linked to a  Email: \_\_\_\_\_  Phone: \_\_\_\_\_

*\*Please note that if your Zelle information is incorrect and payment is bounced back, a paper check will be mailed to the home address listed above.*

If opting for a Paper Check, please provide a mailing address:

Address Line #1 \_\_\_\_\_

Address Line #2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Name of Budget/Fund: \_\_\_\_\_

Entertainment/Trip Dates: \_\_\_\_\_

Destination: \_\_\_\_\_

Business Purpose: \_\_\_\_\_

Transportation Type:  If Other: \_\_\_\_\_

For private car: Total Number of Miles to Claim: \_\_\_\_\_

For University-owned vehicle or rental car: Total Fuel Claim: \$ \_\_\_\_\_

For more information regarding UCLA's Travel Policies, please refer to the link below:  
<https://www.travel.ucla.edu/policy-resources/reimbursement-allowances-mileage-meals>

Travel Reimbursement Items: Please itemize all expenses below.

**\*ORIGINAL RECEIPTS ARE REQUIRED**

| Date: | Expense: | Amount: |
|-------|----------|---------|
|       |          | \$      |
|       |          | \$      |
|       |          | \$      |
|       |          | \$      |
|       |          | \$      |
|       |          | \$      |
|       |          | \$      |
|       |          | \$      |
|       |          | \$      |

For a business hosted event please list names of ALL attendees, titles and their affiliation. (a separate sheet may be attached).

Please send your PDF receipts along with this reimbursement request form to the EEB Finance email: [EEBFinance@lifesci.ucla.edu](mailto:EEBFinance@lifesci.ucla.edu)