

DELAWARE STATE UNIVERSITY

PERSONAL EXPENSES REIMBURSEMENT INSTRUCTIONS

** Please complete this form if you are requesting reimbursement from any approved out of pocket expenses as a DSU Employee. Below are the instructions on how to complete this form accurately. Please reach out to Accounts Payable Department (accountspayable@desu.edu) for questions. **

ALL RECEIPTS OF THE EXPENSES MUST BE SUBMITTED TO OBTAIN REIMBURSEMENT!!!!!!

SECTION 1 – Basic Information

EMPLOYEE INFO: The D# & Name of the DSU Employee seeking the reimbursement.

REASON FOR REQUEST: The name of the event related to the reimbursement.

MEHTOD OF PAYMENT: Select whether you would like a check or WIRE/ ACH to your bank account. If you choose WIRE/ ACH, please attach wiring information.

SECTION 2 – Expense Details

DATE: Date the transaction occurred. Items that are over 60-calendar days will not be reimbursed.

TRANSACTION DESCRIPTION: Describe the transaction you are requesting reimbursement (Ex. Trip to A/CAP Conference in Harrisburg, PA).

TRANSACTION TYPES:

AIRFARE: All expenses related to traveling by air, such as baggage fees.

MEALS: Consist of breakfast, lunch, & dinner. If meals are held with others, please include their names in this area. Tips on meals are included for reimbursement within reason.

REGISTRATION: Includes the amount to attend conferences or training related to daily employment duties.

LODGING: Includes the cost of staying overnight with hotel taxes. Do not include any meals charged to the room; they should be included under the "Meals" section.

TRANSPOR: Includes the cost of getting to & from the destination on the ground, such as tolls, rental car, private vehicles, public transportation, etc. The usage of your personal vehicle will only be reimbursed based on the IRS business standards (\$0.625/ mile in 2022). Normal commute to & from work & gas purchases does not get reimbursed.

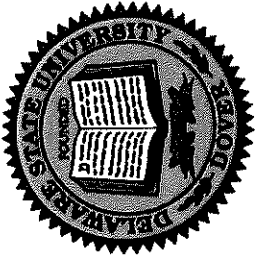
MISC/ OTHER: Includes all other areas not mentioned previous. Provide an explicit description is needed for reimbursement.

SECTION 3 – Signatures/ Approvals

~ All necessary signatures must be provided before reimbursement can be processed. No individual can sign/ approve on more than one line (**NO DOUBLE SIGNATURES**).

~ By signing this form, you certify the expense incurred as a necessary expenditure in conducting Delaware State University business, and reviewed that the expenses are reasonable & conform to Delaware State University policies.

Requests completed & signed should be sent to accountspayable@desu.edu for processing



DELAWARE STATE UNIVERSITY
OFFICE OF BUSINESS & FINANCE

(This form is to be used for DSU Personnel seeking reimbursement for actual expenses incurred in accordance with DSU Policy)

Requisition number: **R0179834**

Employee D#:	D10059906	Employee Name:	Zhongyan Lin	Date:	February 10, 2025
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Reason for Request: Reimbursement for traveling to Ningbo, China, to teach for the DESU oversee program

Accounting Info:	FUND	ORG	PRGM	Method of Payment:	
	1100	2690	12	<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Wire/ ACH

Expense Details

Date	Transaction Description	Transaction Type	ACCOUNT	Amount
8/25/2023-12/22/2023	Ningbo, China	Airfare	8010	\$1,281.75
8/25/2023-12/22/2023	Meals on 120 days x 52.65 = 6318 > 3718.25 Note: as maxima expenses is 5000, I can only claim 3718.25 for meal because 3718.25 + 1281.75(air) = 5000 Please note that because the meal cost is larger than the maximum 5000, I dropped all other receipts except for airtickets	Meals	8035	3718.25
		Choose an item.		
		Choose an item.		
		Choose an item.		
		Choose an item.		
		TOTAL:		\$5000

Zhongyan Lin

08/01/2024

Requester/ Employee

Date

2/10/25

Immediate Supervisor/ Dépt Head Approval

Date

OSP/ RFA Approval, if needed

Date

Requests completed & signed should be sent to accountspayable@desu.edu for processing

Note: I sent the travel authorization request form before 08/22/2023, but because a outdated form was used, which caused delay processing at Dr. Liu's office.