CIC/Woodrow Wilson Visiting Fellows EXPENSE REIMBURSMENT FORM

OUT OF POCKET EXPENSES (Receipts Must Be Attached For All Items Over $20.00)

PROGRAM / ACTIVITY WWVF

DATE	CITY & STATE	TRANSPORTATION Plane, Train, Taxi $	Enter # of Miles	AUTO @ $ .50/MILE	MEALS B $	MEALS L $	MEALS D $	TIPS $	OTHER EXPENSES $	TOTAL
			0	$0.00						$0.00
			0	$0.00						$0.00
			0	$0.00						$0.00
			0	$0.00						$0.00
			0	$0.00						$0.00
			0	$0.00						$0.00
			0	$0.00						$0.00
			0	$0.00						$0.00
			0	$0.00						$0.00
			0	$0.00						$0.00

TOTAL EXPENSES $0.00

HONORARIUM (Requires Completed W-9)

TOTAL DUE $0.00

☐ Remit To Institution

Institution Name

Address

City, State, Zipcode

☐ Remit to Individual

Name

Address

City, State, Zipcode

Name of Person Completing Form

Phone Number

Signature and Date