Winthrop University Foundation

WUF-E Expense Report

Return to: WUF Finance Office, 302 Tillman Hall

Name: _____ Beginning Date: _____

Address: _____ Ending Date: _____

_____

Date	From	To	Trip Destination	Purpose	Miles	Rate	Total
						0.54	
						0.54	
						0.54	
						0.54	
						0.54	
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						0.54	
						0.54	
						0.54	
						0.54	
						0.54	
			Total Travel				

I certify to the Winthrop University Foundation that the above expenses are valid and for the benefit of Winthrop University. I also certify that reimbursement for these expenses is not being requested from another source.

Employee Signature: _____ Date: _____

Employee Supervisor Name: _____

Supervisor Signature: Date:

We welcome your questions – please call X2229 or email Brenda Floyd floydb@winthrop.edu or Robin Embry embryr@winthrop.edu.