

204 Woods Hall Phone: 314.516.6685

Fax: 314.516.5786

ACCOUNTING BUSINESS CENTER

email: sabusiness@umsl.edu

Expense Report Authorization Form

A detailed business purpose and/or documentation must be included for each Expense Report reimbursement and on the Expense Report.

Date of Request:	
Employee Name:	
Employee ID:	
MOCODE(s) & PS Account(s):	
Maximum Reimbursement Amount:	
Date(s) of Trip:	
Business Purpose:	
	Authorized Supervisor Approval
Signature of Approver:	
Printed Name of Approver:	
Approval Date:	