

**VISITOR REIMBURSEMENT FORM**

NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PERMANENT HOME ADDRESS: (Required by the University for 1099 Tax Purposes)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ADDRESS TO MAIL CHECK (if different than Home Address):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_ US CITIZEN    \_\_\_ Permanent Resident    \_\_\_ VISA TYPE: \_\_\_\_\_

*This section MUST be completed or we cannot process your request for payment.*

SEMINAR NAME or REASON FOR VISIT: \_\_\_\_\_

IF COLLABORATION, in brief, what was discussed? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

HOST'S NAME: \_\_\_\_\_

DATE OF ARRIVAL: \_\_\_\_\_  
Time: \_\_\_\_\_

DATE OF DEPARTURE: \_\_\_\_\_  
Time: \_\_\_\_\_

\*\*\*\*\* TO BE COMPLETED BY HOST \*\*\*\*\*

**EXPENSES:** (check applicable and Attach Original Receipts)

\_\_\_ HONORARIUM: Amount \$ \_\_\_\_\_ (an additional form is needed)

\_\_\_ Auto MILEAGE    \_\_\_ TRAVEL: (air, train, bus, taxis)    \_\_\_ Per Diem

What meals were provided: \_\_\_\_\_

Comments or details regarding amounts, limits: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

ACCOUNT INFORMATION: \_\_\_\_\_