

Elon College, the College of Arts & Sciences

Faculty Travel/Professional Development Expense Report

Number all receipts by item # and attach in chronological order with this form AND the completed Travel Reimbursement Form. This form should be page 2.

Faculty/Staff Name:
Department:
Name of Conference
Date Submitted:

<i>For Office Use:</i>
Account #
Total Amount Requested:
Total Amount Approved:
Date Approved:

Item	Date	Amount	Currency	Explanation of Charge	Receipt Attached
1					
2					
3					
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