

Travel and Expense Reimbursement Form Business Office

Name:	

Please submit the completed form with the supporting documentation (original receipts) attached directly to the Business Office located at 120 N. Clovis Ave. or email to AP@chsu.edu. Claims for reimbursement must be submitted within a reasonable period, which the IRS defines as within 60 days after the expenses were paid or incurred. **Expenses submitted after 60 days will not qualify for reimbursement.**

BUSINESS RELATED EXPENSES

Date	Description Include name of person(s) or company hosted, business purpose, destination and/or location, sub-ledger descriptions, if applicable	College Code	Department Number	Dues & Subscriptions	Supplies	Business Meals	Employee Procurement	Special Events	Other Expenses	Total Expenses
Use a separate line for each item or event.			71410	72500	71600	73600	75600			

Updated 09/2025