

EXPENSE REPORT INSTRUCTIONS

1. This form is to be used for approval of expenses that relate to reimbursement directly to an Associate, Board Member, volunteer, physician, resident and all others incurring travel/business expense on behalf of the Sparrow Health System.
2. A pre-approval form PR-112 "Conference/Travel Request" is required for any non-local travel.
3. Please read Personnel Policy #336 "Travel and Business Expense Reimbursement Policy" before completing this form. It includes important guidelines on reimbursable expenses and authorization requirements.
4. Use the reverse side of this form to detail your expenses and indicate the check information requested.

Original receipts are required for all expenses of \$25 or more. Original receipts are strongly encouraged for all expenses claimed under \$25. In the event that it is not practical to obtain a receipt for expenditures less than \$25, the following accountability must be separately provided in lieu of a receipt for each expenditure: Amount of expense, Date of expense, Location expense was incurred, Description of expense and business purpose.
5. The business purpose of all expenses must be noted.
6. All expenses should be reported on the form, including those expenses paid directly by the Hospital (air fare, pre-paid registrations, etc.). Circle these amounts on the front of this form and deduct the total at "B".
7. Travel advances must be reported to ensure accountability for funds received in advance of traveling. Deduct them at "C".
8. Completed forms, including appropriate approval and completed check information, should be sent to the Accounts Payable department for processing.
9. Meals - Associates are permitted to expense the actual cost (including a 15% gratuity) with a per diem maximum of \$50 for a full day (or \$100 per day for major metropolitan cities over 500,000 population) and \$30 for a partial day. See policy #336 for details.

A-112 (Rev. Effective 12-04)