GSSA Travel Reimbursement Checklist

Legal Name:				
Email:				
Department:				
Date of Travel:				
Circle Only One:	Attended Conference	Presented at Con	ference	
GSSA Representative's	Name:			
ALL PACKETS MUST	TINCLUDE:			
Copy of GSSA Travel A	Award Approval Letter			
OGPS/GSSA Travel Ex	xpense Itemization Form, Comp	oleted and Signed		
•	conference, use the correct mileagrigin, destination, and miles trave	•	f 2015). Also i	nclude a
	eimbursement for airfare, include ce from Concur. All airfare must		well as the tic	eket
Original, itemized recei	ipts			
All receipts show pa	ayment information (name, check	# / credit card #)		
All receipts must be	eitemized			
More than one rece	ipt can be taped to each page, but	none can overlap		
Proof of Presentation exorganizers	x: abstract in the conference prog	ram, certificate of preser	ntation from co	onference
Proof of Attendance (ex	x: name badge from the conference	ee, boarding passes)		
Confirmation that Dire	ct Deposit form has been subm	itted to Accounts Payab	ole	
Were you the person who	incurred the initial travel expe	nses? Circle only one:	Yes	No
	Amount to be Reim	bursed by GSSA for Ti	ravel:	
	Amount to be Reimburse	d by GSSA for Registra	ation:	

Submitter must email their packet as well as confirmation of Accounts Payable Direct Deposit to their GSSA representative. BMS and SPHTM students should email directly to ogps@tulane.edu. Follow the naming convention Last Name_First Initial_SemesterYear.

Total amount to be reimbursed by GSSA: