

**YOUNGSTOWN STATE UNIVERSITY
REIMBURSEMENT VOUCHER
FOR SEARCH COMMITTEE PAYMENT OF
CANDIDATE'S MEALS**

Banner ID	Y _____
DC	_____

(PLEASE TYPE OR PRINT)

PAYEE _____
FACULTY/STAFF NAME

_____ CANDIDATE NAME

_____ POSITION INTERVIEWED FOR

_____ INTERVIEW DATE(S) AT YSU

_____ ARRIVAL TIME AT YSU

_____ DEPARTURE TIME FROM YSU

Meals:

Date Expense Incurred	Name/City of Business	Names of Participants	Cost

TOTAL \$ _____

I REQUEST PAYMENT FOR \$ _____ AND CERTIFY THAT IT IS CORRECT AS ITEMIZED ABOVE.

SIGNATURE OF STAFF/FACULTY

DATE

Itemized receipt is required

SPECIAL NOTE:

<p>RECOMMENDED:</p> <p>_____ Department Head (Date)</p>	<p>PAYMENT APPROVED IN THE AMOUNT OF \$ _____</p> <p>Account to Be Charged: _____ - _____ - 701325 - _____</p> <p>Signature Authority: _____ Date: _____</p> <p>_____ Human Resources Review Date</p>
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