



Participant Travel Expense Report

Cost Center: - . -
project task award

Traveler's Name: _____
Home Address: _____
Daytime Phone: _____
Email Address: _____

**** IMPORTANT – CHECK ONE BOX ****

- Active Duty
- Military Beneficiary
- Civilian
- Companion
- Other _____

Departure Location: _____ Date: _____
Destination: _____
Return Location: _____ Date: _____

Total Costs Incurred (From Itemization Detail on Page 2):

Lodging _____
Meals _____
Transportation _____
Other _____
Total Cost: \$ _____

Purpose: _____
Protocol #: _____
Study Visit #: _____

Receipts for all non per-diem costs of \$75 or more each must be submitted for final reimbursement.

I certify that I completed the trip for which this travel reimbursement was requested and that the declared expenses were actual and necessary. I have not been/will not be reimbursed for any of these expenditures from another source. By signing this form, I authorize HJF to contact me if necessary for questions regarding travel expense and/or payment. I agree to be contacted either by phone, email or regular mail.

Traveler:** _____
 Signature _____ Print Name _____ Date _____
 Authorized Approver:** _____
 Signature _____ Print Name _____ Date _____

**Signature mandatory regardless of final payment.

Regulatory Affairs: _____
Director Print Name Phone Number Date

See Page 2 for Itemization of Expenses →

For Use by Foundation Accounting Office	
_____	_____
Approving Initials	Date

Participant Travel Expense Report

Date	LODGING	\$ Amount
Date	MEALS	\$ Amount
Date	TRANSPORTATION	\$ Amount
Date	OTHER	\$ Amount
TOTAL:		

- a) Receipts must be attached for all lodging, regardless of amount.
- b) Receipts must be attached for each individual cost that totals \$75 or more.
- c) Per-diem costs for meals do not need to be itemized and no receipts are required.

SPECIAL INSTRUCTIONS

- A separate travel expense report must be submitted if the travel expense is for the companion. Participant and companion travel cannot be on the same form.
- Due to HIPPA and privacy regulations, please send both pages via **SECURE FILE TRANSFER to Marianne Spevak (mspevak@hjf.org) and Lisa Keane (lkeane@hjf.org). DO NOT SUBMIT via REGULAR EMAIL.**
- If you do not have an account on the HJF Secure File Transfer, please contact Marianne Spevak (mspevak@hjf.org) to have an account set up for you.

Please send both pages of this form VIA SECURE FILE TRANSFER to Marianne Spevak (mspevak@hjf.org) and Lisa Keane (lkeane@hjf.org). DO NOT SUBMIT via REGULAR EMAIL.

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