**Indiana University East**

**Disbursement Voucher Worksheet**

Prepared by:
Phone #
Date

Account Manager Signature

 Description Account Class Amount

Section II **Non-Employee Travel Expense**

Service performed Place of performance regular employer

Dates of travel

Auto miles lodging

 Total

Remit to:

**Payee Information**

**If payment is for Services, Awards, Rent, Royalties, or Medical, payee MUST complete a W-9 form and a Payee Certification form.**

**Also indicate service performed and date in description field.**

**If payment is for Non-Employee Travel Reimbursement or Moving expense complete Section II**