

RECEIPT FOR SERVICES INTERNATIONAL TRAVEL ONLY

THIS FORM IS REQUIRED TO BE COMPLETED IN LIEU OF A COMPANY RECEIPT OR WHEN ANOTHER FORM OF RECEIPT IS NOT AVAILABLE, AND MUST BE SUBMITTED WITH THE TRAVEL REIMBURSEMENT REQUEST FORM.

NAME OF TRAVELER: _____

SIGNATURE & DATE OF TRAVELER: _____

PSU ID# OF TRAVELER: _____

EMAIL OF TRAVELER: _____

I certify that this receipt is proof of payment for services provided for the benefit of the University and that the trip is in accordance with relevant travel regulations. I additionally certify that the vendor is unable to provide a company receipt and that another form of receipt is not available.

DEPARTMENT OF TRAVELER: _____

Vendor Name	Date of Services Rendered	Amount	Currency	Description of Services

BUSINESS PURPOSE OF THE SERVICE RENDERED
LOCATION WHERE SERVICE WAS PROVIDED (Country, City, State, Province, etc.)

SIGNATURE OF VENDOR

DATE

I certify that I have provided the services described above, that I have received the payment as stated, and that I am unable to provide a company receipt and another form of receipt is not available.