

SINGLE EVENT TRAVEL (SET) CARD LOG

This form is to only be used for transactions charged to the SET card. All other incurred expenses should be listed on the Non-SET card Travel Expense Report.

FOR MONTH OF _____ 20__ Bearpass # M _____ Submit Completed form to Carrington 113 - Financial Services

EMPLOYEE NAME (LAST, FIRST)	FUND	ORGN	PROGRAM	ACTIVITY	AMOUNT

Direct Deposit: Yes No

Sign up here [\(MSU Employees/Students Only\)](#) SET Card Number: _____ SET Card Limit: _____

DESTINATION: _____ DEPARTMENT: _____

Business Purpose: (include list of people traveling)

GRANT EXPENSES: Attach documentation of how this meets scope of project.

DATE	Destination FROM/TO Description of Expense	DEP. TIME	ARV. TIME	73000	73000	73000	73001	73004	MISC. EXP.	TOTAL
				BKFST	LUNCH	DINNER	HOTEL	TRANSPORT /FUEL		

ABOVE TOTALS →

TOTALS FROM ADDITIONAL SHEETS →

TOTAL CASH WITHDRAWALS → (Attach Bank Withdrawal slip to backup)

TOTAL SET CARD EXPENSE →

I affirm the above claim is correct, that payment has been made from the SET Card and that I have not been previously reimbursed. I further affirm that I have not received and will not receive from any other source whatsoever any payment or any partial payment except as provided by law.

CLAIMANT SIGNATURE _____ APPROVER PRINT NAME _____ SIGNATURE _____

Initial to certify there are no alcohol purchases included in the reimbursement.

TITLE _____ TITLE _____ DATE APPROVED _____

DO NOT WRITE BELOW THIS LINE - FINANCIAL SERVICES USE ONLY

FUND	ORGANIZATION	ACCOUNT	PROGRAM	ACTIVITY	AMOUNT	DESCRIPTION	AMOUNT
						SET CARD CASH WITHDRAWALS	
						MONEY RETURNED TO BURSAR	
						NON-REIMBURSABLE EXP. CHARGED TO SET CARD	
						TOTAL DUE TO MSU	
						AP TOTAL DUE TO EMPLOYEE	

FOAPAL TOTAL → _____ Verified by and Date: _____

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TOTALS (move to page 1) →										

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