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INSTRUCTIONS: 1. COMPLETE 2 COPIES OF STATEMENT (OF TRAVEL FY	(PENSE FOR FACH	I TRIP							
ALL RECEIPTS INCLUDING PCARD/E-TI ONE COPY OF FORM AND P CARD RE FOR THIS TRAVELER®S REIMBURSABL ACCOUNTS PAYABLE: PAYMENT REQUES PRINT COMPLETED PAYMENT REQUES	CKET RECEIP CEIPTS MUST <u>E</u> EXPENSES, (BT: TYPE :TRA)	TS MUST BE PROV STAY IN DEPARTM COMPLETE ON-LIN VEL REIMBURSEM	/IDED TO P MENT NE PAYMEN ENT	IT REQUEST		PLESOFT)				
6. ENTER PAYMENT REQUEST NUMBER II 7. ATTACH ORIGINAL RECEIPTS FOR REII AND FORWARD WITH PAYMENT REQUES	MBURSEMENT	TO OTHER COPY	OF STATEM		AVEL EXPENS	E		. /<- E0+->4		