

NON-EMPLOYEE EXPENSE WORKSHEET

Columbia University in the City of New York OFFICE OF THE CONTROLLER	PAYEE NAME Jane Q. Doctor	INVOICE #
--	------------------------------	-----------

ALERT - Before you pay a non-resident alien you must determine payment eligibility based on visa status.

DESCRIPTION OF EXPENSES			UNSEGREGATED EXPENSES A	SEGREGATED EXPENSES B
EXPENSE NO.	DATE OF EXPENSE	BUSINESS PURPOSE		
1	06/15/16	Delta airlines, roundtrip airfare	\$323.49	
2	07/12/16	Taxi to airport	\$32.12	
3	07/13/16	Breakfast (no alcohol)	\$12.45	
4	07/13/16	Lunch (no alcohol)	\$22.45	
5	07/14/16	Dinner (no alcohol)	\$34.87	
6	07/15/16	Taxi to airport	\$43.55	
7	07/15/16	Taxi home	\$37.68	
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
TOTALS			\$506.61	\$0.00

Example

Non-Employee Details

Payee Name	Jane Q. Doctor
Dates of Visit	July 13-14, 2016
Purpose of Visit	Speaker in Topology Seminar
Email	janeqdoctor@math.somewhere.edu
Phone	888-555-1234