



**Ray Travel Award
Audit Form
Non-Travel Based Activities**

This audit form and a completed Vendor Setup Form are due to SL-CGSGrants@osu.edu within 15 days of conclusion of the conference. The max amount that can be requested is the maximum for the cycle for which you received the grant. Contact the office if you have questions. Please submit all receipts in one PDF and disclose all sources of any additional funding in the email.

Council of Graduate Students
The Ohio State University

First and Last Name:

Date:

Employee/ Student ID Number:

Directions: Please follow the example and fill out information for each receipt you are turning in. The receipts must be **original** and **itemized** in order to count towards the reimbursement.

Item/Expense	Vendor(s)	Amount Spent	Date Expense Incurred	Explanation	Audited Amt. [Office Only]
<u>Example:</u> Ohio College Personnel Assoc., one-year graduate student membership	<u>Ex:</u> Ohio College Personnel Association	<u>Ex:</u> \$50	<u>Ex:</u> 10/1/10	<u>Ex:</u> Membership to professional organization	
TOTAL EXPENSES					