

## Certification of Expenses

Expense reimbursement claim for the amount of \$ \_\_\_\_\_

Payable to \_\_\_\_\_

I certify that the expenses were incurred by me on official University business on the dates shown, and no expenses claimed as reimbursable relate to personal or unallowable expenses. I also certify that I did not receive reimbursement from any other source(s) for the expenses claimed. In the event of an overpayment, or if payment is received from another source for any portion of the expenses claimed, I assume responsibility for repaying UC Regents in full for those expenses.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

To be completed if UCSF employee signing on behalf of the guest

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Date: \_\_\_\_\_