



CONCUR EXPENSE REALLOCATION

COMPLETE AND ATTACH TO YOUR CONCUR REPORT

NAME OF EMPLOYEE: _____

DATE(S) OF TRAVEL: _____

PURPOSE OF TRAVEL: _____

BUDGET CODE FOR THIS TRAVEL: _____

IS THIS A PERKINS EXPENSE? IF YES, LIST PERKINS ID NUMBER BELOW

_____ **NO** _____ **YES** **PERKINS ID #** _____

EMPLOYEE SIGNATURE: _____

DATE: _____