

IN-STATE HOTEL/MOTEL TAX EXCEPTION FORM

(For use when an expense report reimbursement is submitted as a result of an In-State Hotel/Motel provider refusing to remove "occupancy tax" from a traveler's lodging invoice.)

Complete the following information, obtain required signature of Departmental Approval Authority, and submit with Expense Report to the Office of the Controller.

Employee Name:

ADP ID #:

Dates of Lodging:

Expense Report #:

Hotel Name:

Hotel Phone #:

Hotel Address:

Contact Name Hotel Authority:

Reasonable Exception Request (please explain the facts and circumstances relating to your attempt to resolve the hotel/motel agent's refusal to omit "occupancy tax" on the lodging dates on which an expense was incurred):

Traveler's Signature:

Date:

(I certify and attest that the above statements are true. I also have read and understand the University's policy on In-State Hotel/Motel Tax Exemption procedures.)

Departmental Approval Signature:

Date:

Business & Finance Approval Signature:

Date: