



**De La Salle University**  
**Office of the Controller – Accounting and Finance Services**

**SUMMARY OF RESEARCH EXPENSES FOR REIMBURSEMENT**  
 FOR THE PERIOD COVERED \_\_\_\_\_

PRS Number/date: \_\_\_\_\_

EXPENSES	PAGE NUMBER	AMOUNT	PERCENTAGE TO TOTAL
1. Food (not to exceed 25% of total reimbursement)			
2. Transportation			
3. Communication (not to exceed 20% of total reimbursement)			
4. Accommodation			
5. Supplies and materials			
6. Equipment			
7. Others: Specify			
<b>Total</b>			

Submitted by:

\_\_\_\_\_  
 Signature over printed name