

## Request to Change an Existing e-Reimbursement Profile for a Non-Employee

*Note: Complete only the section that applies*

| Request to Change Information Previously Entered in a Non-Employee Profile |          |       |                  |          |
|--|----------|-------|------------------|----------|
| <i>Note: Complete only the information that needs to be changed.</i>       |          |       |                  |          |
| Non-Employee's Name (Required):  |          |       |                  |          |
| Non-Employee ID Previously Assigned by Accounting Services(Required):      |          |       |                  |          |
| Address Line 1:  |          |       |                  |          |
| Address Line 2 (Indicate if N/A):  |          |       |                  |          |
| City:  |          |       | Zip/Postal Code: |          |
| State and/or Province:   |          |       | Country:         |          |
| <b>Default Funding</b>   | Dept ID: | Fund: | Program:         | Project: |
| Date of First Travel Expense (e.g., date of airfare purchase):             |          |       |                  |          |

| Request to Add/Remove Alternate(s) to/from an Existing Non-Employee |                          |                                  |                                   |            |                        |
|---|--------------------------|----------------------------------|-----------------------------------|------------|------------------------|
| Non-Employee/Terminated Employee's Name (Required):                 |                          |                                  |                                   |            |                        |
| Non-Employee ID/UW Person ID (Required):                            |                          |                                  |                                   |            |                        |
| Alternate Information   |                          |                                  |                                   |            |                        |
| Add   | Remove                   | Last Name<br>(30 characters max) | First Name<br>(30 characters max) | UW Empl ID | E-mail Address         |
| <input checked="" type="checkbox"/>                                 | <input type="checkbox"/> | Connelly                         | Dana                              | 00091534   | Dana.connelly@wisc.edu |
| <input checked="" type="checkbox"/>                                 | <input type="checkbox"/> | Snell                            | Robin                             | 00254247   | Robin.snell@wisc.edu   |
| <input type="checkbox"/>  | <input type="checkbox"/> |                                  |                                   |            |                        |
| <input type="checkbox"/>  | <input type="checkbox"/> |                                  |                                   |            |                        |
| <input type="checkbox"/>  | <input type="checkbox"/> |                                  |                                   |            |                        |

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