

TRAVEL EXPENSE REIMBURSEMENT FORM

Traveler Name:	University ID number:	Today's Date:

Department:	Total Amount Requested:

Date(s) of Travel:	Travel Destination(s):

Residential Address:

Please state Business Purpose of travel:

Include: 1. main reason for travel (if research provide short description); 2. conference/meeting title; 3. conference/meeting dates; 4. venue of conference/meeting; 5. Comments.

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Travel Expense Itemization:

Cost

Required Travel Receipts:

Airfare Expense		flight itinerary, must show proof of payment
Lodging Expense		itemized lodging receipt, must show proof of payment
Car Rental Expense		itemized receipt
Taxi, Shuttle, Bus Expense		receipts required if combined total is greater than \$75
Conference Registration		receipt
Baggage Fees		receipt
Parking		receipt
Auto Mileage (number of miles)		copy of auto liability insurance card
Other		receipt
Meals:		total maximum domestic meal expense is \$64 per day
Breakfast		itemized receipts
Lunch		itemized receipts
Dinner		itemized receipts
Other		receipt
Foreign Lodging Per Diem (number of days)		flight itinerary
Foreign Meals Per Diem (number of days)		flight itinerary
Total:		

Account Or Project To Be Charged:

Receipts Smaller Than A Sheet Of Paper Must Be Taped To A Sheet Of Paper.

Attach All Receipts To Completed Form And Submit To The Departmental Office Coordinator.

Traveler Signature

Date