

Travel Reimbursement Worksheet

Travel #: _____

POST TRIP INFORMATION (MULTIPLE LINES HAVE BEEN PROVIDED FOR MULTIPLE DESTINATIONS)

Departure Date and Time:	Return Date and Time:
Destination:	
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Destination:	

REIMBURSABLE EXPENSES (DOCUMENTATION REQUIRED)

Airfare (an itemized receipt showing method of payment and flight itinerary) \$ _____

Lodging/Hotel (an itemized receipt showing method of payment or how the transaction was settled, ie. Credit card, cash) \$ _____

Registration (an itemized receipt and conference itinerary) \$ _____

Car Rental (an itemized receipt and rental contract. For non-university contract vendors, LDW and CDW must be purchased) \$ _____

Mileage (map printed showing the miles driven, or beginning and ending odometer readings) # of miles driven _____ x \$.535 = _____

MISCELLANEOUS EXPENSES (ITEMIZED RECEIPT REQUIRED IF OVER \$50)				MEALS (CHECK ONE) <input type="checkbox"/> PER DIEM <input type="checkbox"/> ACTUAL EXPENSE*			
Expense Type	Date	Amount	Business Purpose	DATE	BREAKFAST	LUNCH	DINNER

ADDITIONAL COMMENTS (POST TRIP):

TOTAL AMOUNT REQUESTED FOR REIMBURSEMENT \$ _____

Actual meal expenses are reimbursable up to per diem allowance for the destination. Itemized receipts are not required, however please indicate the meal as noted above.

Signature	Date
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