

DOMESTIC TRAVEL REIMBURSEMENT WORKSHEET

Submit completed form along with all original receipts to your travel processor within two weeks of return date.

	Date:		
Name:			
Mailing Address: City, State, Zip:			
Phone:			
E-mail Address:	U.S Citizen		
Purpose of Travel:			
Destination:			
Initial Departure Date: Return Date:			
Did you obtain a Travel Advance for this trip? No Yes Was there any personal time during this trip No Yes			
MEALS AND INCIDENTAL EXPENSES (LIST ACTUAL EXPENSES Actual amount spent on meals listed on daily log. You may There is no per diem for Domestic (See page 2 for daily log.	claim up to \$92 per day.		
LODGING Did you share a room? Yes No If so, with whom?			
Number of nights: Rate: \$ Tax: \$ Oth Number of nights: Rate: \$ Tax: \$ Oth Number of nights: Rate: \$ Tax: \$ Oth	er: \$		
TRANSPORTATION Airfare: \$ RT Paid for by: Credit Card Private Car Mileage: License Plate #: C Rental Vehicle: \$ Rental Vehicle Gasoline: \$ Train: \$ Other: \$	Check here to confirm your liability insurance		
MISCELLANEOUS			
Registration: \$ Tele/Fax/Internet: \$ Parki	ng: \$ Other (explain): \$		
Are you being reimbursed from any other source Yes 🗌 I	No if so what source?		
Comments:			
SIGNATURES			
I certify that the above is a true statement, that the expenses claimed were incurred by me on official University business on the dates shown, and that I have attached original receipts for each expense of \$75 or more, as required by University policy.	AUTHORIZING SIGNATURE DATE		
Traveler's Signature Date	Print name and title		

MEALS AND INCIDENTALS

Please indicate by date the actual amounts spent for Breakfast, Lunch, Dinner, and any Incidentals. Please keep in mind that the allowed Maximum is \$92.00 for each 24-hour period (domestic rate). Foreign rate will vary depending on city and country.

ACTUAL EXPENDITURES AS REQUIRED BY G-28 Travel Regulations:

• Subsistence Expenses (starts page 25) · Reporting Travel Expenses (starts page 41)

DATE	BREAKFAST	LUNCH	DINNER	INCIDENTALS	DAILY TOTAL

I hereby certify that I am not requesting reimbursement for any alcohol purchased on this trip.