

REQUEST FOR TRAVEL REIMBURSEMENT 2017

FINAL Reimbursement
 Early Reimbursement
 Cash Advance (Req. VP approval)
 Conf. Pre-Pay
 Register Trip for Grad Travel

TRAVEL # _____

TRAVELER INFORMATION

NAME _____ UNID #: _____

Email _____ Phone #: _____

TRIP INFORMATION

Departure Date: _____ Return Date: _____

Destination (City): _____

Purpose of Trip: _____ Presenting? Y N

FINANCIAL INFORMATION

Project Name: _____

Project/Activity #: _____

P.I. (signature) _____

P.I. Name (printed) _____

EXPENSES

Category	Details	Amount
AIRFARE	Booked by: <input type="checkbox"/> U Travel Agency <input type="checkbox"/> Traveler	\$
Airfare Fee	<small>(Fee charged only for Refundable or International ticket = \$30)</small>	
Misc. Airfare Fees	Excess Baggage _____ Other _____	
PERSONAL AUTO	_____ miles @ 54.5 ¢ per mile = \$ _____	
LODGING	_____ nights @ \$ _____ = \$ _____	
MEALS	_____ days @ \$ _____ = \$ _____ PD? <input type="checkbox"/>	
CONFERENCE FEE	Pre-paid? _____ How paid? _____	
CAR RENTAL	_____ days @ \$ _____ = \$ _____	
Insurance	_____ days @ \$3.00 per day = \$ _____	
TAXI, BUS, etc.		
PARKING	_____ days @ \$ _____ per day = \$ _____	
MISCELLANEOUS		
Total Trip Expenses		
Deduct Pre-Paid		
TOTAL due traveler	<input type="checkbox"/> FINAL Reimbursement <input type="checkbox"/> Early Reimb. <input type="checkbox"/> Cash Advance <input type="checkbox"/> Conf. Pre-Pay	