TRAVEL & EXPENSE

Name: **Destination:** (City/State)

Departure Date		**Departure Time:**		**Return Date**		**Return Time**	

Reason for Trip:

ITEM	Reimbursement Details	Amount
	Sub-Total	$0.00
Mileage In Personal Car	$0.510 per mile	$0.00
The allowed Meal Per Diem will be paid unless otherwise indicated. Please specify which meals and dates you are NOT requesting the Meal Per Diem (For example, if meals were provided at a conference or meeting):		
(Total will not include Per Diem amounts)	**Total**	$0.00

Comments:

Signature

Funding*:

*i.e., Annual Department Allotment, RIF, Endowed Chair Funds, Grant Funds, Startup Funds, Other

Receipts are no longer required for amounts under $75.00 (except for Hotel Folio's and Supplies purchased while Traveling)