

**DOMESTIC TRAVEL  
REIMBURSEMENT WORKSHEET**

Submit completed form along with all original receipts to your travel processor

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 SS#/Employee ID#: \_\_\_\_\_ UC Employee: Yes  No   
 Address: \_\_\_\_\_ U.S. Citizen: Yes  No   
 \_\_\_\_\_ City of Residence: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Vendor ID (if known): \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_ Home Campus: \_\_\_\_\_

**Account to be charged:** \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

Destination: \_\_\_\_\_

Initial Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Initial Departure Time: \_\_\_\_\_ Return Time: \_\_\_\_\_

Did you obtain a Travel Advance for this trip? No  Yes  Amount: \$ \_\_\_\_\_

Was there any personal time during this trip? No Yes From: \_\_\_\_\_ To: \_\_\_\_\_

**MEALS AND INCIDENTAL EXPENSES (LIST ACTUAL EXPENSES ON PAGE 2)**

Actual amount spent on meals listed on daily log. You may claim up to \$62 per day.

**There is no per diem for Domestic (See page 2 for daily log.)**

**LODGING**

Did you share a room? Yes  No  If so, with whom? \_\_\_\_\_

Number of nights: \_\_\_\_\_ Rate: \$ \_\_\_\_\_ Tax: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

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**TRANSPORTATION**

Airfare: \$ \_\_\_\_\_ RT Paid for by: Credit Card \_\_\_\_\_ Charged to Department \_\_\_\_\_

Private Car Mileage: \_\_\_\_\_ License Plate #: \_\_\_\_\_ Check here to confirm your liability insurance

Rental Vehicle: \$ \_\_\_\_\_ Rental Vehicle Gasoline: \$ \_\_\_\_\_ UC Vehicle: Yes  No

Taxi/Bus: \$ \_\_\_\_\_ Train: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

**MISCELLANEOUS**

Registration: \$ \_\_\_\_\_ Tele/Fax/Internet: \$ \_\_\_\_\_ Parking: \$ \_\_\_\_\_ Other (explain):

\$ \_\_\_\_\_

Comments: \_\_\_\_\_

**SIGNATURES**

<p>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.</p> <p>_____          AUTHORIZING SIGNATURE DATE</p>	<p>_____          AUTHORIZING SIGNATURE DATE</p> <p>_____          Print name and title</p>
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