

TRAVEL REIMBURSEMENT FORM

USE THIS FORM AFTER YOU RETURN FROM A TRIP. UPON COMPLETION OF THE INFORMATION REQUESTED BELOW, ATTACH ALL ORIGINAL RECEIPTS AND SUBMIT TO ELEXUS MOODY.

NAME: _____

FOR STUDENTS ONLY

What address should check be mailed to?

TA# (if known) _____ DESTINATION: _____

DEPARTURE DATE: _____ TIME: _____ am/pm

Days BETWEEN? _____

RETURN DATE: _____ TIME: _____ am/pm

PER DIEM MEALS REQUESTED: YES _____ NO _____

<u>MEAL</u>	<u>DEPART</u>	<u>RETURN</u>	<u>IN STATE</u>	<u>OUT OFSTATE</u>
Breakfast	Before 6:30am	After 11:00am	\$6.00	\$7.00
Lunch	Before 11:00am	After 1:30pm	\$7.00	\$9.00
Dinner	Before 5:15pm	After 8:30 pm	\$12.00	\$16.00

COST OF TRAVEL (Please include totals for each category):

AIR: _____ RENTAL CAR: _____ PERSONAL CAR (mileage): _____

HOTEL: _____ (Must have itemized bill)

REGISTRATION: _____ (Must have receipt or canceled check. Copy of registration application will not suffice)

PARKING: _____ TAXIS/UBER/LYFT: _____

MISCELLANEOUS (Baggae, public transpotation, etc.): _____ The Travel Office does not reimburse for tips, Xeroxing, purchasing newspapers, dry cleaning, etc.