



TRAVEL REIMBURSEMENT REQUEST FORM

NOTE: please complete this form, attach all original receipts, and a copy of the program agenda for any conference or meeting attended, and send to Finance and Research Services - Parrington Hall, Room 303, Box 353055.

Name of Traveler: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Person completing form (if different from traveler): \_\_\_\_\_

TRIP INFORMATION

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

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

Date and Time of Travel: Departure: \_\_\_\_\_ Return: \_\_\_\_\_

Personal time\*: \_\_\_\_\_

\*Include exact times personal time began and ended, and the location(s).

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

TRANSPORTATION

Airfare (attach a copy of itinerary) \$: \_\_\_\_\_

Taxi and Bus Fare (list dates here): \$: \_\_\_\_\_

Train/Rail (attach a copy of itinerary) \$: \_\_\_\_\_

Car Rental (attach final rental agreement) \$: \_\_\_\_\_

Mileage (attach Google Maps results – see Travel website for rate) \$: \_\_\_\_\_

Parking (list dates here): \$: \_\_\_\_\_

Other: \$: \_\_\_\_\_

Total Transportation \$ \_\_\_\_\_

LODGING AND PER DIEM

Lodging Claimed (room rate & taxes only) \$: \_\_\_\_\_ Meal Expenses \$: \_\_\_\_\_

Were any meals provided to you? If so, please indicate which days/meals. \_\_\_\_\_

Did you host any meals on UW business? If so, please indicate which meals and attach names/affiliations of those hosted and include itemized receipts. \_\_\_\_\_

Total Lodging and Per Diem Claimed \$ \_\_\_\_\_

MISCELLANEOUS EXPENSES

Telephone/Fax/Internet (business related) \$: \_\_\_\_\_

Registration/Membership Fees \$: \_\_\_\_\_

Other: \$: \_\_\_\_\_

Total Miscellaneous Expenses \$ \_\_\_\_\_

TOTAL AMOUNT CLAIMED

Funding Source: \_\_\_\_\_ Total Amount Claimed \$ \_\_\_\_\_

Task Option Project

BUDGET INFORMATION (FISCAL USE ONLY)

Budget Name: \_\_\_\_\_ Budget #: \_\_\_\_\_

Authorized Signature(s): \_\_\_\_\_