DOMESTIC TRAVEL REIMBURSEMENT WORKSHEET

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

Name:	Date:	Date:					
SS#/Employee ID#:	UC Employee:Yes No						
Address:	U.S. Citizen: `	en: Yes No					
	City of Reside	City of Residence:					
Phone:	Vendor ID (if known):						
E-mail Address:	Home Campu	ıs:					
Account to be charged:							
Purpose of Travel:							
Destination:							
Initial Departure Date: F							
Initial Departure Time: F	Return Time:						
Did you obtain a Travel Advance for this trip	? No Yes	s Amount: \$					
Was there any personal time during this trip? N	o Yes From:	To:					
MEALS AND INCIDENTAL EXPENSES (LIST ACTUAL EXPENSES ON PAGE 2)							
Actual amount spent on meals listed on daily lo	g. You may claim up	to \$92 per day. Amount: \$					
There is no per diem for Domestic (See page	e 2 for daily log.)						
LODGING							
Did you share a room? Yes No	f so, with whom?						
Number of nights: Rate: \$	Tax: \$	Other: \$					
Number of nights: Rate: \$	Tax: \$	_ Other: \$					
Number of nights: Rate: \$	Tax: \$	Other: \$					
TRANSPORTATION							
Airfare: \$ RT Paid for by: Cr	RT Paid for by: Credit Card Charged to Department						
Private Car Mileage: License Plate #	ense Plate #: Check here to confirm your liability insu						
Rental Vehicle: \$ Rental Vehic	Rental Vehicle Gasoline: \$ UC Vehicle: Yes No						
Taxi/Bus: \$ Train: \$	Other: \$						
MISCELLANEOUS							
Registration: \$ Tele/Fax/Internet:	Parking	\$Other (explain):					
\$							
Comments:							
SIGNATURES							
I certify that the above is a true statement, that the expenses claimed were incur by me on official University business on the dates shown, and that I have attac original receipts for each expense of \$75 or more, as required by University pol-	ned						
TRAVELER'S SIGNATURE DATE							

(Page 1 of 2)

MEALS AND INCIDENTALS

Please indicate by date the actual amounts spent for Breakfast, Lunch, Dinner, and any Incidentals. Please keep in mind that the allowed Maximum is \$92.00 for each 24-hour period (domestic rate). Foreign rate will vary depending on city and country.

ACTUAL EXPENDITURES AS REQUIRED BY G-28 Travel Regulations:

- Subsistence Expenses (starts page 25)
- Reporting Travel Expenses (starts page 41)

Date	Breakfast	Lunch	Dinner	Incidentals	Daily Total