

REQUEST FOR TRAVEL REIMBURSEMENT

NAME: _____ VT ID #: _____ DATE: _____

TRAVEL TO (LOCATION): _____

MEETING ATTENDED: _____

PURPOSE OF TRAVEL (CAPACITY ON PROGRAM): _____

DATES OF THE MEETING: _____

TRAVEL: DEPARTURE DATE: _____
ARRIVAL HOME DATE: _____

TRANSPORTATION COSTS:

(A) By State or private auto (to destination/meeting):
State car (check) ____ / Private car (round trip mileage) _____

(B) By commercial airline:

BE SURE TO USE ONE OF THE UNIVERSITY CONTRACT AGENCIES

(1) Cost of travel from Blacksburg to Roanoke Airport (and return):

(a) Private car (round-trip mileage) _____
Parking fee (attach RECEIPT) \$ _____
(b) Limousine (attach RECEIPT) \$ _____

(2) Airline Travel: (attach ticket)

(a) Air Travel Authority (check) _____
(b) Airline tickets purchased by traveler \$ _____

(3) Transportation costs at destination (to and from hotel/airport):
Limousine/taxi (attach RECEIPT) \$ _____ \$ _____

HOTEL COSTS: (Attach RECEIPT) Maximum (see lodging guidelines). Conference lodging may not exceed the guideline by more than 50%. **Indicate here if you stayed at a conference hotel** _____

<u>Date</u>	<u>Cost</u>	<u>Date</u>	<u>Cost</u>	<u>Date</u>	<u>Cost</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

MEALS: Maximum (see M&IE chart).

<u>Date</u>	<u>No.</u>	<u>Cost</u>	<u>Date</u>	<u>No.</u>	<u>Cost</u>	<u>Date</u>	<u>No.</u>	<u>Cost</u>
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____

REGISTRATION: (attach RECEIPT) \$ _____

MISCELLANEOUS: (please specify) _____