

Travel Auth #:	
E-Doc #: (Office use Only)	

## TRAVEL REIMBURSEMENT FORM Please fill out COMPLETELY.

Name:	Emp ID #:			
Destination:				
Dates of Travel:	Conference Dates:			
Business Purpose of Trip:				
	TRAVEL EXP	ENSES		
Lodging: Designated Lodging' Sharing Room? Roommate Names_	? ☐ Yes ☐ No ☐ Yes ☐ No	You must send in itemized copies with		
		Category	Additional Info	Category Total (USD)
Meal Per Diem:	☐ Yes ☐ No	Personal Vehicle	# of miles multiplied by 0.445	
Students must provide F  Departure from Tuc	aculty email approval for meal per diem.	Ground Transportation	Taxis, trains, busses,etc.	
Date	Time	Airfare	Include additional charges for luggage	
Return to Tucson:  Date	Time	Meals	If taking per diem, leave total blank.	
		Lodging	Fill in total for cost of room plus tax.	
Mileage:	☐ Yes ☐ No	Conference Registration	If not applicable, leave total blank.	
Miles or Odometer Readings:		Miscellaneous	Meeting expenses, Wi-Fi connection, etc.	
Additional Information:			Grand total	
AUTHORIZATION:				
	Account Number	_ Faculty Signatu	ıre	
Date	Account Number	OEBC Bus Office Signature		