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

Name:	Date:					
SS#/Employee ID#:		UC Employee: Yes No				
Address:		Citizen: Yes No				
		City of Residence:				
Phone:	Vendo	Vendor ID (if known):				
E-mail Address:	Home	Home Campus:				
Account to be charged:						
Purpose of Travel:						
Destination:						
Initial Departure Date:	Return Date:					
Initial Departure Time:	Return Time:					
Did you obtain a Travel Advance for th	nis trip? No	_ Yes Amount: \$				
Was there any personal time during this t	trip? No Yes Fro	m: To:				
MEALS AND INCIDENTAL EXPENSES (LIST ACTUAL EXPENSES ON PAGE 2)						
Actual amount spent on meals listed on c	daily log. You may o	claim up to \$62 per day.				
There is no per diem for Domestic (Se	e page 2 for daily	log.)				
LODGING						
Did you share a room? Yes No_	If so, with wh	om?				
Number of nights: Rate: \$	Tax: \$	Other: \$				
Number of nights: Rate: \$	Tax: \$	Other: \$				
Number of nights: Rate: \$	Tax: \$	Other: \$				
TRANSPORTATION						
Airfare: \$ RT Paid for b	fare: \$ RT Paid for by: Credit Card Charged to Department					
Private Car Mileage: License F	License Plate #: Check here to confirm your liability insurance					
Rental Vehicle: \$ Renta	ental Vehicle: \$ 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 incurred by me on official University business on the dates shown, and that I have attached original receipts for each expense of \$75 or more, as required by University policy.		AUTHORIZING SIGNATURE DATE_				
AUTHORIZING SIGNATURE DATE	Print nam	Print name and title				

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## **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 \$62.00 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:**

Date	Breakfast	Lunch	Dinner	Incidentals	Daily Total

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

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