

HAS – Travel Expense Worksheet

Date Form Submitted to Business Office _____

TRAVEL INFORMATION: Name _____ EID # _____ Travel Authorization # T- _____

KFS Account to Charge _____ Account PI _____ Type of Travel _____

Departure Date _____ Departure Time _____ Return Date _____ Return Time _____

Purpose of Trip (provide conference/meeting info.) _____

Location (City/State) _____ Meeting/Conference Dates _____

Personal Dates Taken _____

LODGING: Is hotel designated? **Yes** **No** (If yes, please attach hotel list).

Hotel Name 1 _____ #Nights _____ Hotel Name 2 _____ #Nights _____ \$ _____

*Travel Policy Lodging Rate: \$ _____ *Travel Memo Needed _____ To be completed by the Business Office. \$ _____

TRANSPORTATION:

University Vehicle _____ Domestic Airfare _____ International Airfare _____ Personal Vehicle _____ miles @ 62.5/mile \$ _____

Odometer Reading: Start _____ End _____ (If more than 20 miles, attach Map Quest)

Taxi \$ _____ Tolls \$ _____ Shuttle \$ _____ Public Transit \$ _____ Rented Vehicle \$ _____ \$ _____

Parking Fee \$ _____ Gasoline \$ _____ (only if not claiming milage) \$ _____

MISCELLANEOUS: Registration \$ _____ Abstract \$ _____ Printing \$ _____ Other \$ _____ \$ _____

TOTAL PER DIEM – See worksheet below to be completed by Business Office. \$ _____

LESS ADVANCE: Grant Award (Attach award Letter) \$ _____ UA Cash Advance \$ _____ Other \$ _____ \$ _____

TOTAL TRAVEL REIMBURSEMENT AMOUNT \$ _____

PER DIEM WORKSHEET - To be completed by Bussiness Office Staff:

75% allowed on dates of departure and return, 100% allowed for overnight stay

PD Location:			Per Diem Rate \$	
Date	Breakfast – 20%	Lunch – 25%	Dinner – 55%	Daily Total
TOTAL PER DIEM				