

TRAVEL REPORT

(Due two weeks after date of return)

Please read and follow the instructions that appear below this form.

Name (1) _____	Date Submitted (2) _____
Purpose of Trip (3) _____	Date of Departure (4) _____
Destination (5) _____	Date of Return (6) _____
Account number to be charged (7) _____	Mode of Transportation (8) _____
Mail check to: (9) _____	_____

DATE	DESCRIPTION	MEALS	LODGING	TRANSPORT	OTHER	TOTAL
	Direct Payment (10)					
	Sub Total (11)					
	Payment by Traveler (12)					
	Sub Total (13)					
	Total (14)					

Signature of Traveler (15) _____	Extention _____	Date _____	Total Spent by Traveler (17) \$ _____	
			Travel Advance Received (18) \$ (_____)	
			Amount Due to Traveler (19) \$ _____	
Department Approval (16) _____	Extention _____	Date _____	Refund Due to College (20) \$ _____	

AREA BELOW FOR FINANCIAL SERVICES USE ONLY

Amount	Comm. Code or Description	Account Number	G/L Approval
			Date
	Total		

INSTRUCTIONS FOR COMPLETING THE TRAVEL REPORT FORM

Requests for reimbursement of travel expenses should be submitted on a travel report form in accordance with the following:

* If reimbursement is for mileage only, or if all of the travel expenses were paid directly by a college check or purchase order, this form should not be used.

* *Expenses paid for by the traveler that are included as part of this report must be substantiated with original receipts.*

Please consult your institution's travel reimbursement policy for details on what types of expenses are allowable, and what type of documentation is required.

* All travel advances must be cleared by submitting a completed Travel Report within two weeks after the date of return (6).

1. NAME Name of traveler and/or person who received a travel advance.
2. DATE SUBMITTED Date that the travel report is submitted for department approval.
3. PURPOSE OF TRIP Brief description of the trip, such as a conference, seminar, recruiting, etc. Please include the name of the conference or seminar.
4. DATE OF DEPARTURE Date on which the travel began.
5. DESTINATION City or town traveled to. If travel was outside of the United States, also list the country. If there were multiple destinations, please attach an itinerary.
6. DATE OF RETURN Date on which reimbursable travel ended.
7. ACCOUNT NUMBER TO BE CHARGED Enter the general ledger account number (not the account name) to which the travel expenses will be charged.
8. MODE OF TRANSPORTATION Indicate the principal mode(s) of transportation used, such as air, personal auto, rental car, train, etc.
9. MAIL CHECK TO: Enter the address to which the reimbursement check is to be mailed.
Please note that the check can only be sent to the payee.
10. DIRECT PAYMENT Itemize all payments for travel that were paid directly by a college check, such as hotel deposits, airfare, etc.
11. SUB TOTAL Total all of the direct payment items.
12. PAYMENT BY TRAVELER Itemize all expenses paid for by the traveler from personal or travel advance moneys.
13. SUB TOTAL Total all of the payment by traveler items.
14. TOTAL Total of (11) and (13).
15. SIGNATURE OF TRAVELER Signature of the traveler.
16. DEPARTMENT APPROVAL Signature of the Department Chair, Director, or Supervisor authorizing the travel expenses
17. TOTAL SPENT BY TRAVELER Enter the total spent by the traveler. This amount should equal the amount listed in the total column, on line (13).
18. TRAVEL ADVANCE RECEIVED Enter the total moneys received by the traveler as an advance.
19. AMOUNT DUE TO TRAVELER Enter the amount spent by the traveler in excess of the advance.
20. REFUND DUE TO COLLEGE Enter the amount of advance moneys not spent by the traveler.
If a refund is due the college, a check payable to the college must be attached to this report.