

DOMESTIC TRAVEL REIMBURSEMENT WORKSHEET

Name: _____ Date: _____
 Address: _____ UC Employee: Yes No
 _____ U.S. Citizen: Yes No
 Phone: _____ City of Residence: _____
 E-mail Address: _____ Vendor ID (if known): _____
 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 this trip? No Yes Amount: \$ _____

Was there any personal time during this trip? No Yes From: _____ To: _____

MEALS AND INCIDENTAL EXPENSES (LIST ACTUAL EXPENSES up to \$62/day)

Enter actual amount spent on breakfast, lunch, and dinner (See page 2 for daily log)

There is no per diem for Domestic Travel

LODGING (capped at \$275 per night, excluding taxes and fees, within continental US)

Did you share a room? Yes No If so, with whom? _____

Number of nights: _____ Rate: \$ _____ Tax: \$ _____ Other: \$ _____

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TRANSPORTATION

Airfare: \$ _____ RT Paid for by: Credit Card Charged to Department

Private Car Mileage: _____ License Plate #: _____ Check here to confirm liability insurance

Rental Vehicle: \$ _____ Rental Vehicle Gasoline: \$ _____ UC Vehicle: Yes No

Taxi: \$ _____ Bus: \$ _____ Train: \$ _____ Other: \$ _____

MISCELLANEOUS

Registration: \$ _____ Tele/Fax/Internet: \$ _____ Parking: \$ _____

Other (explain): \$ _____

Comments: _____

SIGNATURES

<p style="font-size: small;">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.</p> <p>_____ DATE</p>	<p style="text-align: center;">AUTHORIZING SIGNATURE DATE</p> <p>_____</p> <p style="font-size: x-small; text-align: center;">Print name and title</p>
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Submit completed form along with all original receipts to your travel processor

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 ITEMIZED RECEIPTS REQUIRED per [G-28 Travel Regulations](#):

- *Subsistence Expenses (starts page 24)*
- *Reporting Travel Expenses (starts page 40)*

Date	Breakfast	Lunch	Dinner	Incidentals	Daily Total