

H&SS TRAVEL EXPENSE REIMBURSEMENT REQUEST

INSTRUCTIONS

1. Complete all relevant information. Use **one form per trip**.
2. Submit the request to the department preparer **within 30 days** of completion of travel.
3. All **original, itemized receipts** must be attached to this request.
4. Documentation must be attached for any exceptions to the Travel Expense Policy.

GENERAL INFORMATION

NAME: _____

DESTINATION (City, State, Country): _____

FOREIGN CURRENCY? (*specify*): _____

DATE OF DEPARTURE: _____ Depart Time (*if claiming per diem*): _____ am/pm

DATE OF RETURN: _____ Return Time (*if claiming per diem*): _____ am/pm

CHARGE TO: _____

PURPOSE OF TRAVEL

Check applicable item(s) and describe, spelling out all acronyms of organizations.

CONFERENCE TRAVEL

RESEARCH ACTIVITY

COLLABORATION (Provide name of collaborator and brief topic description)

OTHER

ADDITIONAL INFORMATION

Was airfare billed directly to CMU through a travel agent? (*please circle*) YES NO

Was a travel advance received for this trip? (*please circle*) YES NO

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EXPENSES

Please detail costs below and attach **itemized** receipts. On restaurant checks, identify alcoholic beverages. When claiming the cost of meals for others, state the purpose and list the name of each guest when 5 or fewer are in attendance. For groups of 6 or more simply provide a headcount along with the purpose.

DATE & EXPLANATION	AMOUNT
TOTAL RECEIPTS	\$ -

PER DIEM MEALS & LODGING (If applicable*)

In lieu of receipts, you may claim a per diem cost for meals (or meals & lodging) based on GSA rates (<http://www.gsa.gov/perdiem/>). You must stick with a single method per trip, **either** per diem **or** actual receipts. Additionally, the per diem amount will be reduced per GSA standards to account for meals furnished at no additional cost to you (e.g. a conference dinner included in the registration fee, or a breakfast included in your hotel rate). ***Note: in H&SS, graduate students may not request per diem.**

To claim a per diem, fill in the date(s) on this chart and check off reimbursable meals for each day.

	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5				ADD DAYS AS NEEDED
DATE									
BREAKFAST									
LUNCH									
DINNER									
LODGING									

TRAVELER SIGNATURE

To the best of my knowledge, this request complies with the University Business and Travel Expense Policy. The expenses are actual costs with a valid professional purpose and do not include any personal expenses.

_____ _____
Traveler signature Date