



Travel Expense Statement

Voucher Number	
Review by AP	

TRAVEL TYPE:

First Name	M	Last Name	Vendor ID (if known)	PO Number (if known)
Address			Speed Chart Number	
City, State and Zip			Name of Dept Sponsoring Travel	
Destination			From: mm/dd/yyyy	To: mm/dd/yyyy

Purpose of Trip: (Attach prior approval form if applicable. Attach conference/seminar agenda. Please note: Any extended time taken before or after Conference/meeting or established agenda/program requires further explanation.)

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Was any time on this trip used for vacation or personal time? If "Yes" please show the dates(s) and time(s) that vacation or personal time was taken:

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"I do solemnly swear, under criminal penalty of a felony for false statements subject to punishment by fine of not more than \$1000 or by imprisonment of not less than one nor more than five years, that the above statements are true and I have incurred the described expenses and the State use mileage in the discharge of my official duties for the State."

Employee or Non-Employee (Print Name)	Employee or Non-Employee Signature	Date
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Immediate Supervisor (Print Name)	Immediate Supervisor Signature	Date
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Speed Type	Dean, Dept Chair, Director or PI Print Name	Dean, Dept Chair, Director or PI Signature	Amount or % Split

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CASH ADVANCE AMOUNT (if applicable)

Subscriptions		Mileage	
Memberships		Meals	
VISAPAS		Lodging	
Other - Supplies		Air Travel	
Other - Operating		Parking	
		Ground	
Postage		Transportation	
Telecom - Local		Rental Car	
Telecom - Data		Registration	

TOTAL EXPENSE:

Business Mgr or Grants Office (signature)	DUE TO/FROM:
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ID # _____ Name: _____ Travel From: _____ To: _____

OTHER TRAVEL RELATED EXPENSES

AIRFARE & BAGGAGE COSTS

DATE	ITEM/EXPLAIN (attach Receipts)	Amount
TOTAL		

GROUND TRANSPORTATION (Taxi, Shuttle, Limousine)

DATE	ITEM/EXPLAIN (attach Receipts)	Amount
TOTAL		

HOTEL/LODGING (Include Hotel Name, City, State or Country)

DATE	ITEM/EXPLAIN (attach Receipts)	Amount
TOTAL		

RELATED EXPENSES

DATE	EXPENSE TYPE	ITEM/EXPLANATION - Attach Receipts	Amount
	Registration		
	Subscription		
	Membership		
	Other Operating Expenses		
	Postage		
	Other Required Supplies/Materials		
	Telecom Charges - Local		
	Telecom Charges - Data		
	VISAPAS		
TOTAL			

Information below is related to this trip but is not reimbursable as payment has been previously made. The items below have been prepaid by P-card, paid directly to the vendor or were reimbursed on an earlier request. **Amount will not transfer to front sheet.**

DECLARATION OF PREPAID EXPENSES ASSOCIATED WITH THIS TRAVEL

DATE	EXPENSE TYPE	Explanation (type of expense, vendor, ie)	Payment Type (Prior Reimbursement, AP paid vendor or PCard payment)	Amount
	Registration			
	Hotel			
	Airfare			