

TRAVEL REIMBURSEMENT

Attach receipts for all expenditures										
DATE OF		Business								
		Days away	TRA		DESCRIPTION: Business reason for trave					8
DEPART	RETURN	from Home	FROM	ТО		of individuals for business me		iness mea	IS	
Travel Expe	nse Record	(Explain a	bove)							
Enter Date ==>									TOT	AL
AIR FARE										
PERSONAL AUTO										
Miles/trip =										
LODGING MEALS										
Breakfast & Tip										
Lunch & Tip										
Dinner & Tip										
OTHER										
Registration										
Parking										
Taxi/Metro										
Postage										
Supplies										
Rental Car										
OTHER (Specify)										
	TOTALS								\$	-
PRINT										
NAME					Total Trav	el Expense	s		\$	-
I claim reimbursement for the above expenses incurred					Less Clai	im Advance				
by me on behalf of Nebr. Wesleyan University, and su										
expenses will not be reimbursed to me from other se					[] to Claimant or:		[] Return to Bus. Office		\$	-
					Account Description					
					Account #					
Signature above Date		Date		Account Description						
orginaturo aborro					2. Account #					
Business Office Use Only					Account # Account Description					
Dadinos Cinico Coc Ciny					Account Description					
VENDOR #					Approved by:					
VOUCHER #					If required, Business Office Signature:					
Entered by: (initials)					Revised 2016					