

Form 100-1-C: Library Travel Reimbursement Form

Name: _____
 Address _____
 E-mail Address: _____
 Phone Ext: _____ Employee ID: _____
 Departure City _____
 Destination City/State/Country _____

Date/Time Left Home: _____
 Date/Time Returned Home: _____
 Date form turned in: _____
 Account Number to Charge (if known) _____
 Trip Authorized By: _____
 Direct Library Billing: _____
 (circle) Airline: yes / no Registration: yes / no

Purpose of Trip: _____

Day #	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	Day 10	Total
Date (MM/DD/YY)											
City IN											
Registration Fees (1)											\$0.00
Breakfast											\$0.00
Lunch											\$0.00
Dinner											\$0.00
Total Meals & Incidentals	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
Hotel Room per Day											\$0.00
Hotel Tax per Day											\$0.00
Phone											\$0.00
Internet											\$0.00
Mileage \$ (complete # below)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	\$0.00
Parking											\$0.00
Shuttle											\$0.00
Taxi											\$0.00
Other (_____)											\$0.00
Tot. Reimbursement Requested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Mileage (# of miles) _____
 Current rate per mile \$ 0.555 (effective 7/1/11)

Prepaid Air Fare											\$0.00
Prepaid Registration											\$0.00

Total with PrePaid	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
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(1) Both the completed registration form and a receipt (proof of payment) are required for reimbursement of registration fees.

This form is to be used as a worksheet and is to be submitted with all required receipts.
 All receipts are still required and reimbursement will be made in accordance with University travel rules and regulations.

The above is a true statement of travel expenses incurred by me on official University business on the dates shown:

Signature: _____ Date: _____