

MONMOUTH COLLEGE TRAVEL EXPENSE RECORD

(Revised April 2009)

To be completed and submitted to the Department Head (staff) or VPAA (faculty) AFTER the trip is completed.

Name _____ Department / Office _____

Departure _____ Return _____
 Date Time (a.m./p.m.) Date Time (a.m./p.m.)

Trip Purpose & Destination _____

Persons Accompanying _____

»TRANSPORTATION

If personal auto was used, did you request a college auto and it was not available? Yes _____ No _____

Odometer Reading (if used a college auto, attach the yellow copy of the Physical Plant Vehicle Authorization form)

Departure _____ Return _____ Total Miles _____

Mileage Reimbursement Requested Car or minivan - \$.36 per mile \$ _____
 Full Van - \$.42 per mile \$ _____
 If College Car Available - \$.15 per mile \$ _____

Air or Train or Car Rental From _____ To _____ \$ _____

TOTAL TRANSPORTATION \$ _____

»OTHER EXPENSES (Receipts and/or documentation are required with this report)

Dates:								Total
Breakfast - inc. tip*	\$	\$	\$	\$	\$	\$	\$	\$
Lunch - inc. tip*								
Dinner - inc. tip*								
Tips - Porter & Misc.								
Hotel (receipt required)								
Taxi - inc. tip								
Local bus or carfare								
Misc.: Itemize								
Total Other Expenses	\$	\$	\$	\$	\$	\$	\$	\$

TOTAL TRANSPORTATION AND OTHER EXPENSES (from above) \$ _____

- ANY ADVANCE RECEIVED \$ _____

= **REIMBURSEMENT REQUESTED OR AMOUNT TO BE REFUNDED**

TO BUSINESS OFFICE (use parentheses if refunding the Business Office) \$ _____

I hereby certify that these expenses were incurred by me as a necessary expense in the service of Monmouth College, and have not been paid by any other source.

Signature _____ Date _____

Approved by Depart. Head (staff) _____ Date _____ Acct# _____

Approved by VPAA(faculty) _____ Date _____ Acct# _____

Approved by Business Office _____ Date _____