

Department of Physics (MC 0435)
Katrina Loan
118 Robeson Hall,
850 West Campus Drive
Blacksburg, Virginia 24061
Ph:540-231-2709 Fax: 540-231-5551

TRAVEL REIMBURSEMENT WORKSHEET

Date: _____
Name/Title: _____
Complete Address: _____

Phone #: _____ Email Address: _____
Destination: _____
Purpose of trip: _____
Date/Time Departed: _____
Date/Time Returned: _____
Miles (Personal Auto): _____ Motor Pool (Y/N): _____
Rode with: _____
Airline: TA or P-card (yes/no): _____ Personal funds/amount: _____
Explain other P-card usage: _____

•EXPENSES•

Please attach original, detailed receipts with a paper clip.

(Day 1) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 2) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 3) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 4) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 5) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 6) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 7) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 8) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 9) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

(Day 10) Date: _____ Lodging Amount: \$ _____
M&IE Amount: \$ _____ Other daily expenses*: \$ _____

*Other daily expenses include taxi, limo, tolls, baggage handling, porter, parking (where?),
Conference registration, rental car, etc.

> **Traveler Signature:** _____

Please verify Funding Source: _____

Please return completed form and all itemized original receipts to the contact in the header.

Per Diem Link: <http://www.gsa.gov/portal/category/100120>