FOREIGN TRAVEL REIMBURSEMENT WORKSHEET

Submit completed form along with all original receipts to your travel processor.

Name:			_ D	ate:					
SS#/Employee	· ID#:		_ U	C Employe	ee: Y	'es	No		
Extension:			U	.S. Citizen	: Y	'es	No		
E-mail Address:			_ C	City of Residence					
Home Campus:				Vendor I.D. # (if known):					
Account to be Purpose of Trav	charged: /el:								
Destination:									
Did you obtain	a Travel Advanc	e for this trip?		No	Yes	\$			
Was there any	personal time dur	ing this trip?	No	Yes	From:		_ To: -		
Initial Departure Location 1:			Ar	rival Date	Arrival Tim	e Departure	Date D	eparture Tim	
Location 3: Location 4:									
Final Arrival Locati	on:	Fin	al Arriv	/al Date:		Final Arriv	al Time:	:	
<u>TRANSPORTA</u>	<u>TION</u>								
Airfare: <u>\$</u>	RT	Paid for by:		Credit Car	d	Charged to	Depart	ment	
Private Car Mile	eage:Lic	ense Plate #:		CI	neck here	to confirm y	our liat	oility insura	nce
Rental Vehicle:	\$	Rental Vehicle	Gaso	line: \$		UC Vehic	:le: `	Yes N	10
Taxi/Bus: \$	/ Trai	า <u>\$</u>	_	Other: \$		Parkii	ng: <u>\$</u>		
•	ALS AND LODG								
Are you claimin	g per diem meals g per diem lodgin ide receipts for lo	g? Yes		No or	Actual	Amount $$$ Amount $$$ an per diem.			
MISCELLANE	<u>OUS</u> Non-UC Fu	ınding:							
Registration: \$	Te	elephone/Fax: \$		Othe	er (explain): <u>\$</u>			
Foreign Exchar	nge Fees:\$	Exchang	je Ra	te Used: <u>\$</u>	1.00 U.S	. =			_
Comments:									
<u>SIGNATURES</u>	by me on official University b	e statement, that the expenses usiness on the dates shown, a ense of \$75 or more, as require	nd that I h	ave attached	AUTHORIZING S	IGNATURE		DATE	
	Traveler's Signature			Date	Print name and t	itle:			