SSLEEC Department DOMESTIC
Travel Reimbursement Worksheet

Name of Traveler: _____

Funds to be Used: _____

Destination City: _____ Dates of Trip _____

Business Purpose of Trip: _____

Category	Amount	Notes
Meals & Incidentals	$_____	submit meal log in place of receipts. list actual amounts even if daily total exceeds $92.
Lodging	$_____	lodging limit justification form required if room rate exceeds $333/night.
Airfare	$_____	
Registration	$_____	
Transportation		
Parking	$_____	
Train/Bus	$_____	
Taxi/Rideshare	$_____	
Car Rental	$_____	
Car Rental Fuel	$_____	
Mileage		
Personal Car Mileage	License Plate	_____ Insured ☐Yes ☐No
current reimbursement is 76 cents/mile	Starting Address	_____
Round Trip ☐Yes ☐No	Ending Address	_____
Miscellaneous		
_____	$_____	
_____	$_____	

Declaration of Missing Evidence Form required for missing receipts over $50. Each missing receipt requires its own form (individual meal receipts included).

Exceptional Approval Form required for items out of policy. Example: airfare at a class other than economy or car rental larger than intermediate.

For domestic travel, the maximum reimbursable amount is $92 for every 24 hour period.

Revised: 11/2026