



Travel Expense Report

File Within 10 Days of Return From Trip
Attach Original Receipts

Please Print:

| | | | |
|---|------------------|------------------------|---|
| Name | John Doe | Date Submitted | 01/15/16 |
| Employee ID # or Social Security # (last four digits) | xxx-xx-6789 | Time of Departure* | 1/06/16 5:00 a.m. 1/10/16 at 11:00 p.m. |
| Department | | Budget Account Number | 10-0659900-50410 |
| Mail to Department (or) | X (Please Check) | Advance Account Number | 10-0000000-13445 |
| Off Campus Address | Street | City | State Zip |

Business Purpose and Destination Accounting Principles Update, Kansas City, MO

| Expense | Date | | | | | | | Total |
|-------------------------|----------|----------|----------|----------|-----------|------|------|---------|
| | 1/6/2016 | 1/7/2016 | 1/8/2016 | 1/9/2016 | 1/10/2016 | / / | / / | |
| Lodging | 125.90 | 125.90 | 125.90 | 125.90 | 125.90 | | | 629.50 |
| Meal per-diem-full day | | 52.00 | | 52.00 | | | | 104.00 |
| Meal per-diem-breakfast | | | 9.00 | | 9.00 | | | 18.00 |
| Meal per-diem-lunch | 15.00 | | 15.00 | | 15.00 | | | 45.00 |
| Meal per-diem-dinner | 28.00 | | | | | | | 28.00 |
| Business guest meals ** | | | | 49.50 | | | | 49.50 |
| Airfare/Train | 320.00 | | | | | | | 320.00 |
| Taxi/Limo/Bus | 20.00 | | | | 20.00 | | | 40.00 |
| Car Rental | | | | | | | | 0.00 |
| Car Rental Fuel | | | | | | | | 0.00 |
| Personal Auto - Miles | 83 | | | | 83 | | | |
| @ .54 Effect. 01/01/16 | 44.82 | 0.00 | 0.00 | 0.00 | 44.82 | 0.00 | 0.00 | 89.64 |
| Daily Total | 553.72 | 177.90 | 149.90 | 227.40 | 214.72 | 0.00 | 0.00 | 1323.64 |

| *Other Expenses(Attach additional sheet if necessary) | |
|---|--------|
| Explanation | Amount |
| Seminar Registration Fee | 150.00 |
| Tolls | 6.00 |
| | |
| | |
| Total "Other" | 156.00 |

| | |
|----------------------------------|---------|
| Total Daily Expense | 1323.64 |
| Add "Other" Expense * | 156.00 |
| Total Expense | 1479.64 |
| Less Advance | |
| Net Due to Employee | 1479.64 |
| or | |
| Net Due to Valparaiso University | |

| **Business Guest - meals per Hospitality Policy (Attach additional sheet if necessary) | |
|--|--|
| | |
| | |

| | | |
|--------------------|--|----------------|
| Employee Signature | Supervisor Signature(NotTraveler/Employee) | Finance Office |
| | Name of Supervisor(Print) | |

*Time of departure and return necessary for one day travel only. Evening meal reimbursement permitted for work days exceeding 10 hours. Breakfast and lunch will not be reimbursed for trips not requiring an overnight stay.

Policy Effective 04/01/10
mileage rate as of 1/1/16