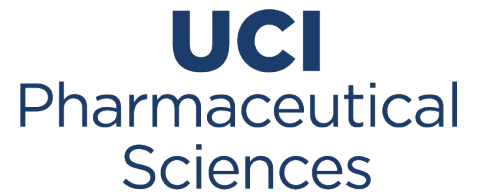


Travel Reimbursement Request Form

Submit to Purchaser with all Original Receipts



Traveler's Name: _____

Traveler's Email: _____

Traveler's Phone Number: _____

Traveler's Mailing Address (for non-employees/students):

Purpose of Trip (include agenda/program from meeting or conference):

Account to be Charged to: _____

Summary of Expenses:

Airfare (coach/economy): _____

Baggage Fee/Misc. : _____

Rental Car (no LDW): _____

Mileage : _____

Conference Registration: _____

Date	City	Ground (Taxi, Parking, Gas)	Lodging	Meals	Other (internet/phone)	Total
Totals:						

Explanation/Remarks:

Total Amount to be Reimbursed: _____

PI Signature: _____

Date: _____

I certify that the above statement of travel or entertainment expenses incurred by me, in accordance with the rules of the University of California, Irvine, is true in all respects; that payment of the amounts claimed has not and will not be reimbursed to me from any other source(s); that travel performed for which reimbursement is claimed was performed by the traveler on University business and that no claims are included for expense of a personal nature or for any other expense not authorized for University business.

Traveler Signature