

Travel Reimbursement Information

please attach all receipts

Name _____ Blue I-Card # _____

Are you employed anywhere on campus? _____yes _____no Group No. _____

Address to send payment _____

Destination _____ Purpose of Trip _____

Method of Travel:

_____ University Car

_____ Personal Car Round Trip Mileage _____

_____ Rode with someone else

_____ Commercial Plane Flight Price if purchased by you _____

_____ Rail Rail Price if purchased by you _____

_____ Rental Car (Justification Req'd)..... Rental Car Price if purchased by you _____

Date _____ /Time _____ AM/PM left Champaign/Urbana

Date _____ /Time _____ AM/PM arrived Destination

Date _____ /Time _____ AM/PM left Destination

Date _____ /Time _____ AM/PM arrived Champaign/Urbana

Hotel expense _____ Was lodging a Conference Hotel? _____ yes _____ no

Additional expenses (tips, tolls, parking):

<u>Item</u>	<u>Cost</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____