

TRAVEL REIMBURSEMENT REQUEST (Travel ID: _____)

Date: _____
 Name: _____
 Title: _____

Home Address: _____

(Check will be mailed to this address)

Conference/Meeting Title or Name: _____
 Location-(City & State): _____
 Dates of Official Business: _____
 Travel Dates: From: _____ To: _____

	Amount	Grant/Funding #
Registration fee		
Airfare*		
Lodging _____ No. of nights / room rate _____ = Lodging Name _____		
Meals (per diem automatically determined by PeopleSoft)		
Taxi/Shuttle From Home to MCI Airport:		
Taxi/Shuttle From MCI Airport to Home:		
Personal Vehicle Mileage (automatically determined by PeopleSoft, <i>maximum of 60 miles @ .56/mile</i>)		
Airport Parking Fees		
Tips		
Foreign Transaction Fees		
Baggage Fees		
Taxi/Shuttle from Airport to Hotel During Travel:		
Taxi/Shuttle from Hotel to Airport During Travel:		
Rental Car** (PRIOR AUTHORIZATION REQUIRED)		
Travel Award is Attached***		
Program/Meeting Agenda is Attached****		

- * Please provide your detailed flight itinerary.
- ** Rental cars require prior approval from Travel Audit. Please provide a detailed explanation of why a rental car is needed.
- ***Please provide travel award documentation.
- ****Please note we cannot start travel reimbursement without the program/meeting agenda.

I have read, understand, and agree to rules and regulations set forth in the employee travel handbook. I understand that all expenses are subject to review prior to approval and reimbursement.

Signature of Traveler: _____

Date Signed: _____