

# College of Music & Dramatic Arts Travel Reimbursement Request Form

Minimum requirements are highlighted in Red.

AS292 - Request for Authorization to Travel, should be turned in prior to travel to claim reimbursement.

**ALL RECEIPTS MUST BE ATTACHED AND SUBMITTED WITH THIS FORM, EXCEPT THOSE REQUIRED FOR LACARTE CHARGES.**

Receipts for LaCarte should be submitted with the LaCarte Entry Log when charges are due.

<b>Traveler:</b>		<b>Date Submitted:</b>	
<b>Destination:</b>			
<b>Departure Date:</b>		<b>Return Date:</b>	
<b>Time of Departure:</b>	AM / PM	<b>Time of Return:</b>	AM / PM

EXPENSES PAID ON LACARTE OR CBA (Do not include receipts)						
Registration	Airfare	Luggage Fee	Airport Parking	Lodging	Rental Car	Miscellaneous
\$	\$	\$	\$	\$	\$	\$
Entry #	Entry #	Entry #	Entry #	Entry #	Entry #	Entry #
<b>Please list below all miscellaneous expenses:</b>						

EXPENSE RECEIPTS (List expenses NOT paid on LaCarte)				
Registration Fees	Airfare (not paid by CBA)		Luggage Fee	Airport Parking
\$	\$		\$	\$
Mileage*	Lodging	Are Meal Per Diems being claimed?		Miscellaneous
\$	\$	Yes	No	\$
<b>Were any meals paid for or provided by the hosting organization/conference/hotel?</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If yes, please list below which meals were paid or provided (ex. 1/1/13 lunch, 1/2/13 dinner, etc. )</b>				
<b>Please list below all miscellaneous expenses:</b>				
<b>Total Amount Requested for Reimbursement -----&gt;</b>				<b>\$</b>
<b>I am receiving additional funding outside from CMDA, (ex. travel grant, TAF, etc.)</b>				<input type="checkbox"/> Yes <input type="checkbox"/> No

*Mileage Information (include documentation, i.e. mapquest route printout)	
<b>Was mileage in-state or out-of-state?</b>	<input type="checkbox"/> In-State <input type="checkbox"/> Out-of-State
<b>If mileage was out-of-state, was an airfare quote obtained prior and attached?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

I certify that all expenses claimed on this request were paid by me and incurred on University business.  
I also certify that I have submitted all receipts and filled out this form complete as to the best of my knowledge.

**Traveler:** \_\_\_\_\_ **Date:** \_\_\_\_\_

FOR OFFICE USE ONLY:                      Voucher Number: \_\_\_\_\_                      Date: \_\_\_\_\_