

Travel Reimbursement Form

(Please submit the completed form to Michaela Crumpler (michaela.crumpler@ttu.edu) via email.)

Name:	Vacation	_ Vacation Days (If applicable): to					
Departure Date:	eparture Date: Departure Time:		Return Date:		Return Time:		
Origination City/State or Country			Destination City/State or Country				
Comments							
Was an advance	received?						
was an advance							T
	Receipt Amounts	Account # (if different from inf			Breakfast	Lunch	Dinner
		provided on travel ap	plication).	Date	Check meals	that need reim	hursement
Airfare				Date	Check means	that need femi	oursement.
Hotel*							
Parking							
Meals**							
Rental Car							
Taxi/Uber							
Luggage Fee							
Rental Car							
Fuel							
Other							
Personal Mileag	ge:						
- Starting	Address:						
- Ending A							
- Addition	al Stops						
	-						
Hotel Room # (Students Only	v): Hotel Ro	ommates (1f a	pplicable):_			
*If attending con	ference and sta	ying at the conference h	notel von must	nrovide nroc	of that the confe	rence is held	l at that

^{*}If attending conference and staying at the conference hotel, you must provide proof that the conference is held at that location.

^{**&}lt;u>Students must provide itemized meal receipts.</u> Receipt must provide description of item purchased and cannot state only "food" or "drink."