Group/Individual Traveler's Name: ______ Information Organization Name (if applicable): _____ Phone Number: Conference Name: _____ Location: ______Travel Dates: _____ Benefit of Conference to FAU: Conference Information Reimbursable Items (check all that apply): Paid registration receipts showing Traveler as the registrant & payee Itemized Hotel receipts showing Traveler as the guest & payee Paid airline tickets showing Itemized Itinerary and Traveler as the passenger & payee Boarding passes for Traveler if requesting airline ticket reimbursement Car rental receipts or Mapped mileage if using your own vehicle Gas show price and gallons and toll receipts. Train/Bus ticket receipt showing Traveler as passenger & payee Awarded Up To: ______ Signature Traveler Initiator: _____ Signature & Date: _____

Today's Date: _____ A&S Travel Reimbursement Justification Form

ASAB Use Only			
Packet Complete (initial)	Travel Spreadsheet (initial)	Scanned (initial)	Filed (initial)