## **Department of Political Science**

Travel Reimbursement Information Request (TRV)
PLEASE ATTACH ALL ORIGINAL RECEIPTS (No copies)

VIP:  Date of Departure:									
					Date of Return:				
					Fund(s) to be ch	narged (Dept. Allowance,	Research Fund	please name),	Start-Up, Other):
	<u>EX</u>	(PENSES:	(check all tha	t apply)					
Breakfast:	depart before 6:30 AM	and/or return	after 11:00 AM;	\$8 in state, \$10 out of state					
Lunch:	depart before 11:00 AM	and/or return	after 1:30 PM;	\$10 in state, \$15 out of state					
Dinner:	depart before 5:15 PM	and/or return a	fter 8:30 PM;	\$17 in state, \$25 out of state					
DATE:			DATE:						
Breakfast		Breakfast							
Lunch		 Lunch							
Dinner		Dinner							
DATE:			DATE:						
Breakfast		Breakfast							
Lunch		Lunch							
Dinner									
DATE:			DATE:						
Breakfast		Breakfast							
Lunch		 Lunch							
Dinner			Dinner						
	,	vehicle not avai	able*)	able but not used; \$0.575 if US					
Hotel/Motel Charges:			Taxi Fares:						
Parking:			Rental Expenses:						
Registration Fees:			Airline Expenses:						
	expense								
Amount	:								
Comments:									

NOTE: \*statement from transportation services confirming the non-availability of a motor pool vehicle must be attached for reimbursement at the higher rate.