REQUEST FOR TRAVEL REIMBURSEMENT (complete after each trip)

Name: __________________________ Office Room # ___________ Tech ID #: ______________

E-mail address: ____________________________

Account to be Charged: ____________________________ (e.g. Research, Travel, CIL, ASPIRES)

Blacksburg Departure Date & Time: __________________________

Blacksburg Return Date & Time: __________________________

Destination: ___________________________________________________________

Purpose of trip: ______________________________________________________________

Conversion Rate (if applicable): __________ = $1 US Dollar

Mode of travel: _____personal car _____mileage (R-trip) 

____________________ Airline (MUST be accompanied by airline itinerary, proof of purchase (if not purchased 

via Department) & Boarding passes)

Was Airline ticket paid in advance via department? Yes ____ No ____

______________ Cost of ticket

Meals: Claiming M&IE? ___yes ___no If no, use space below to list meal cost. (If additional space is needed, please 

continue on back of form):

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<th>Meal</th>
<th>Tip</th>
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Lodging (must attach itemized receipt and the receipt must show a zero balance)

$ per night ______ # nights ______ Shared a room? ___yes ___no (If yes, please

Conference hotel? ___yes ___no list name of individual & department infor.)

Parking (must attach receipt): __________________________________________________________

Business call (if don’t list information below can’t claim reimbursement):

Date, time, name of person called and why

____________________________________________________________________________________

Registration fee expense amount: __________

Paid in advance by you? ___yes ___no Paid by department? ___yes ___no

(Attach receipt if paid by you. Copy of canceled check, front & back is acceptable)

Miscellaneous expenses (e.g., taxi*(tip for taxi drivers are included in M&IE rates), car rental, tolls) must (attach receipts):

*Transportation between places of lodging or business and places where meals are taken are covered under the meals and 

incidental expense per diem and are not reimbursable separately.

**This form should be completed within 30 working days from return date and submitted with all receipts before 

reimbursement can be processed**