

Travel Reimbursement Procedures

Note: *Transportation expenses are reimbursed based on the most economical mode of transportation and the most commonly traveled route consistent with the authorized purpose of the trip.*

1. Submit all reimbursable receipts as agreed upon by sponsor and proof of payment such as credit card receipt, credit card statement, or copy of cancelled check, etc. No receipt is necessary if you used your private car and are claiming only mileage.
2. If you paid for anything by credit card, you will need to submit both the itemized bill/invoice and the credit card receipt. If the credit card receipt is not available, you will need to wait until the charge shows up on your monthly statement and submit that in lieu of the receipt.
3. Send all reimbursable items to Diana Marroquin, University of California Riverside, Multidisciplinary Unit, 3111 INTS, Riverside, CA, 92521.
4. The travel voucher will be processed and then it will be returned to you for your review and signature. You will need to return the signed copy to me.
5. Once we receive the signed travel voucher, it will take approximately three weeks for you to receive your reimbursement.

The Multidisciplinary Unit
TRAVEL REIMBURSEMENT REQUEST

TRAVELER'S INFORMATION

You must provide an ITEMIZED receipt for your lodging.

Department: ETST, IDPG, MCS, RLST, WMST
(please circle the appropriate department)

(PLEASE WRITE CLEARLY)

Date: _____ Name of Traveler: _____

Traveler Social Security #: _____ Email Address: _____

Telephone Extension: _____ Fax Number (_____) _____

Dates of Trip: _____ Departure Time: _____ am / pm Return Time: _____ am / pm

Origin & Destination of the trip _____

Purpose of Trip: _____

Faculty Sponsor _____

EXPENSE ESTIMATION

COST

FOREIGN CURRENCY

Transportation Type:

- Rental Car # of days _____ \$ _____
- Personal Car - License #: _____
(Please provide starting & ending addresses for mileage) # of miles _____ x .505 per mile \$ _____
- Airplane \$ _____
- Bus \$ _____
- Other: _____ \$ _____
(Please explain/describe)

Miscellaneous Expenses:

- Hotel # of days _____ \$ _____
- Conference Registration \$ _____
- Meal Expenses \$ _____
- Other: _____ \$ _____
(Please explain/describe)

Estimated Total Expenses: \$ _____

Memo-For Professor Use Only:

For MDU/Accounting Use Only

Approval: _____
Faculty Sponsor Approval

Approval: _____
Department Chair Approval

Trip #: _____

Account #:	Activity:
Fund:	Function:
Cost Center:	Budget Category:
Project Code:	Special: