## TRAVEL EXPENSE FORM

Last Name First Name Last 4 Digit SSN \#


#### Abstract

Home Address E-mail


| DATE |  |  |  |  |  |  | Total |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Breakfast |  |  |  |  |  |  |  |
| Lunch |  |  |  |  |  |  |  |
| Dinner |  |  |  |  |  |  |  |
| Lodging |  |  |  |  |  |  |  |
| Taxi |  |  |  |  |  |  |  |
| Air/Rail/Bus |  |  |  |  |  |  |  |
| Car Rental |  |  |  |  |  |  |  |
| Parking Fee |  |  |  |  |  |  |  |
| Bridge/Tolls |  |  |  |  |  |  |  |
| Telephone |  |  |  |  |  |  |  |
| Conference Fee |  |  |  |  |  |  |  |
| Gas |  |  |  |  |  |  |  |
| Other Expenses |  |  |  |  |  |  |  |
| Other Expenses |  |  |  |  |  |  |  |

Shared hotel room with
This section is mandatory and expenses cannot be submitted without times indicated

| Date |  |  |
| :--- | :--- | :--- |
| Time | start time (left for trip) | end time (returned home) |
|  | Complete only if claiming mileage |  |
| From |  |  |
| To |  |  |
| Mileage (if claiming mileage please <br> provide proof of mileage-for example <br> mapquest directions) |  |  |

## NOTES

Hotel receipts must have cost per night plus taxes
If 2 or more per room must have statement indicating cost of room is the same for single or double occupancy (this does not apply when 2 employees share hotel room)
Car rentals must include rental agreement indicating no additional insurance was purchased Every receipt must indicate form of payment (check, cash, credit card)
Gas is not reimbursable when using private vehicle or motor pool
If receipts are missing any of the above information please contact hotel, car rental agency, etc. to obtain a receipt with all information required

## Instructions for Travel Expense Form:

1. Enter each date of travel at top of chart, one date per box in DATE row
2. Mark an ' $X$ ' for each meal you are seeking reimbursement. Remember, if a conference serves breakfast or lunch as part of the cost, you cannot claim the per diem for the meal period
3. For all other categories, enter the dollar amount of your receipt for each expense on the date incurred
4. Submit the completed form with all supporting receipts as one PDF to the following link: https://umd.app.box.com/f/9c558c360ad14cb1a24fb9d9a087872a. Please name your file as LastNameFirstInitial_TraveIExpenseForm (example: TaborD_TraveIExpenseForm) before you upload your document.
5. Example below

| DATE | $7 / 11 / 2023$ | $7 / 12 / 2023$ | $7 / 13 / 2023$ | $7 / 14 / 2023$ |  |  | Total |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Breakfast |  | X | X | X |  |  |  |
| Lunch |  |  |  | X |  |  |  |
| Dinner | X | X | X |  |  |  |  |
| Lodging | $\$ 125.63$ | $\$ 125.63$ | $\$ 125.63$ |  |  |  |  |
| Taxi | 30.00 |  |  | 30.00 |  |  | $\$ 60.00$ |
| Air/Rail/Bus | $\$ 358.00$ |  |  |  |  | $\$ 358.00$ |  |
| Car Rental |  |  |  |  |  |  |  |
| Parking Fee |  |  |  |  |  |  |  |
| Bridge/Tolls |  |  |  |  |  |  |  |
| Telephone |  |  |  |  |  |  |  |
| Conference Fee | $\$ 500.00$ |  |  |  |  |  |  |
| Gas |  |  |  |  |  |  |  |
| Other Expenses |  |  |  |  |  |  |  |
| Other Expenses |  |  |  |  |  |  |  |

