

UCSB Department of Physics Foreign Travel Reimbursement Worksheet

Name: _____

Date: _____

Emp ID#: _____
(Fiscal Code #)

UC Employee: Yes No

Address: Department of Physics
MC 9530, Campus

U.S. Citizen: Yes No
(If 'No', please provide copies of passport ID and Visa status.)

E-mail Address: _____@physics.ucsb.edu

Home Campus: UCSB

Vendor ID # (if known): _____

Account to be charged: _____

City of Residence: _____

Purpose of Travel: _____

Destination: _____

Did you obtain a Travel Advance for this trip? No Yes Amount: \$ _____

Was there any personal time during this trip? No Yes From: _____ To: _____

Initial Departure Location _____ Initial Departure Date _____ Initial Departure Time _____

	Arrival Date	Arrival Time	Departure Date	Departure Time
Location 1:				
Location 2:				
Location 3:				
Location 4:				

Final Arrival Location _____ Final Arrival Date _____ Final Arrival Time _____

TRANSPORTATION

Airfare: \$ _____ RT Paid for by: Credit Card Charged to Department

Private Car Mileage: _____ License Plate #: _____ Check here to confirm your liability insurance

Rental Vehicle: \$ _____ Rental Vehicle Gasoline: \$ _____

Taxi/Bus: \$ _____ Train: \$ _____ Other: \$ _____ Parking: \$ _____

PER DIEM (Meals & Lodging)

Are you claiming per diem meals? YES NO or Actual Amount \$ _____

Are you claiming per diem lodging? YES NO or Actual Amount \$ _____

(You MUST provide RECEIPTS for lodging if you are claiming "ACTUAL" rather than per diem.)

Did you share a room? YES NO If so, with whom? _____

MISCELLANEOUS

Registration: \$ _____ Tele/Fax: \$ _____ Other (explain): \$ _____

Foreign Exchange Fees \$ _____ Exchange Rate Used: \$1.00 US = _____

Comments: _____

SIGNATURES

I certify that the above is a true statement, that the expenses claimed were incurred by me on official University business on the dates shown, and that I have attached original receipts for each expense of \$75 or more, as required by University policy.

Traveler's Signature

Date

Authorization

Authorization Signature

Date

Print Name and Title