UCSB Guest Traveler Reimbursement Worksheet

Name:_____Email:_____

Address:_____ Phone: _____
　　　　Street

_____
City　　　　　　　　　　　　　State/Prov., Country　　　　　Zip/Postal Code

DATE(S) _____　　_____　　_____
　　　　Departure date/time　　　Return date/time　　　　Personal day(s) ?

DESTINATION AND BUSINESS PURPOSE (Please describe fully):

_____

_____

EXPENSES

Airfare _____　Rental Car_____　Rental Car Gas_____　Rideshare/ Taxi_____　Bus/ Train/ Other_____

Parking _____　Personal vehicle license plate #:_____　Affirm liability insurance: Yes: ☐　No: ☐

For mileage, please provide the following (gas is not reimbursable if claiming mileage):

Origin address: _____　Round trip?

Destination address: _____　Yes: ☐　No: ☐

Lodging: _____ (For domestic lodging, room rate per night must not exceed $275 USD before taxes; receipt must be itemized to show room rate, taxes and all charges each night)

Registration fee: _____ (must provide name of conference/website/talks schedule)

Membership fee*: _____ Membership Dates covered:_____
(*Additional form required)
Name of Organization:_____

Other expenses: _____ (describe fully)

Comments:_____

_____

For domestic meals, please use Page 2 to document actual meal expenses (no estimates). Foreign meals will have total per diem limitations based on city in which traveler spent the night (see: https://aoprals.state.gov/web920/per_diem.asp).

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.

_____
AUTHORIZING SIGNATURE　　　　　　　　DATE

MEALS AND INCIDENTALS

Please indicate by date the actual amounts spent for Breakfast, Lunch, Dinner, and any Incidentals. Please keep in mind that the allowed Maximum is $79.00 for each 24-hour period (domestic rate). Foreign rate will vary depending on city and country.

ACTUAL EXPENDITURES AS REQUIRED BY G-28 Travel Regulations:
•Subsistence Expenses (starts page 23)
•Reporting Travel Expenses (starts page 39)

Date	Breakfast	Lunch	Dinner	Incidentals	Daily Total
					Grand total