

FRANCIS MARION UNIVERSITY

TRAVEL REQUEST

Date _____

Name _____

Social Security No. _____

Place to be visited _____

Budget Acct. No. _____

Date departure _____

Date return _____

Project No. _____

Purpose of Trip _____

Method of travel: Personal Vehicle Plane Other _____
 University Vehicle Pickup: Date _____ Time _____ Return: Date _____ Time _____

If travel is by VEHICLE, list passengers _____

Funds requested and allowed:

| | |
|--|-------------------------------------|
| To be paid to vendor by Accounting Office | To be reimbursed to traveler |
| Registration Fee _____ | Mileage _____ |
| Airfare _____ | Lodging _____ |
| Vehicle Rental _____ | Meals _____ |
| (Requires Advance Authorization) | Airfare _____ |
| | Other _____ |
| Total _____ | Total _____ |

APPROVED: _____ Signature _____
 _____ Dean/Department Head _____
 _____ President or Vice President _____

| REIMBURSEMENT REQUEST [Submit within seven (7) days after return to campus] | | | | | | | | | | | |
|--|-----------|------|---------|------|-----------|-------|--------|-------|---------|-------|--------|
| Date | DEPARTURE | | ARRIVAL | | MEALS | | | | LODGING | AUTO | |
| | Time | City | Time | City | Breakfast | Lunch | Dinner | Total | | Miles | Amount |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | |

CHECKLIST:

- Social Security Number
- Budget Account Number
- Project Number
- Signature
- Check totals
- Attach receipts for every reimbursement request except meals and taxi (canceled checks and credit card invoices are not valid receipts)

OTHER REIMBURSABLE TRAVEL CHARGES:

REIMBURSEMENT PAYMENT:

- Mail to campus address _____
- Mail to home address _____

TOTAL OTHER _____
 TOTAL REIMBURSEMENT REQUEST _____

APPROVED: _____

 Signature Date

 Dean/Department Head

I HEREBY CERTIFY OR AFFIRM THAT THE ABOVE EXPENSES WERE ACTUALLY INCURRED BY ME AS NECESSARY TRAVEL EXPENSES IN THE PERFORMANCE OF MY OFFICIAL DUTIES FOR FRANCIS MARION UNIVERSITY ON BEHALF OF THE STATE OF SOUTH CAROLINA.

 President or Vice President