

**Before filling out Travel Voucher please save the document to your computer.  
If at all possible please fill out the voucher electronically**

**Name:** name of the person who is receiving reimbursement  
**Campus/Dept:** campus/ department where employee works  
**Meeting Attended:** what meeting/conference did they attend?  
**Departure Date:** what date did they leave?  
**Return Date:** what day did they return?  
**Departure Point:** Departure City- do not include state  
**Departure Time:** Time employee left- please list AM or PM  
**Return Time:** Time employee returned- please list AM or PM  
**City Attended:** City only- do not include state  
**State:** State traveled to

**Did you drive your personal Vehicle?** You may type in Yes/No or chose one from the drop down box  
The rate will automatically calculate the amount using the “city attended” blank  
**Mileage other than from chart** – this blank is used if the City you traveled to is not on the mileage chart.  
**List occupants of vehicle:** please list anyone that traveled with you in your vehicle to the conference.

**Public Transportation-** please list dollar amount (receipt required for reimbursement)  
**Parking Fees-** please list dollar amount (receipt required for reimbursement)  
**Lodging- Motel-** please list dollar amount (receipt required for reimbursement)  
**List occupants of room:** please list anyone that stayed with you in the room

**Paid for by District?** Please type in Yes/No or chose one from the drop down box  
**Actual Cost of Meals- List only if an overnight trip. Day trips are not reimbursed.** – this blank will automatically calculate after the meal reimbursement sheet is complete.  
**Were any meals provided at conference?** Please type in Yes/No or chose one from the drop down box  
**Other-** please list any other expenses with receipts in order to receive reimbursement

#### **Meal Reimbursement Sheet**

Please list the actual meal expense and it will automatically calculate the daily total and it will be included in the “Actual Cost of Meals” blank.

Please include your account number and have your supervisor sign  
Turn in one copy to the business office

If you use a district credit card to pay for your hotel room please make sure Heath Wethington gets a copy of the receipt.