

TRAVEL WORKSHEET

Name: _____ Destination: _____
UIN: _____ Purpose of trip: fill in justification below

Departure Date: _____ Time: _____
Arrival Date: _____ Time: _____

Were any of these personal days? Yes No If yes, which dates? _____

Transportation:

Airplane Train Car (Rental or Private)

Paid by: UIUC Self (If ticket was paid personally, please attach original receipt.)

If a personal vehicle was used, please list total mileage: _____

Miscellaneous Expenses:

Itemize expenses in the space below. Expenses may include cabs, trains, subways, rental cars, parking fees, telephone calls, faxes, internet service, copy service, etc. All expenses over \$10, which were paid personally, must have a receipt. If you do not have a receipt, please state this below.

Date Incurred	Expense Amount	Payment Method	Details

Accommodation Information:

Hotel Name	# of Nights	Total Per Night Charge

Meals Provided during Trip: (Please provide the date and check breakfast, lunch or dinner.)

Date	Breakfast	Lunch	Dinner
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use additional sheets of paper, if needed. Attach original receipts.