

WINSTON-SALEM STATE UNIVERSITY FOUNDATION

Request for REIMBURSEMENTS OF TRAVEL EXPENSES INCURRED IN THE DISCHARGE OF OFFICIAL DUTY - INCLUDING PER DIEM

Instructions to claimant: Complete ALL areas on this form. Attach all necessary receipts and other supporting documents to this form and submit the original to Foundation. Please retain (1) copy for your records. Make sure all appropriate signatures and budget codes are in place.

DEPARTMENT	DIVISION	DATE SUBMITTED
PAYEE'S NAME & MAILING ADDRESS	TITLE	PERIOD COVERED BY THIS VOUCHER: FROM 04/11/18 TO 04/11/18
	PURPOSE OF TRAVEL	

Under penalties of perjury I certify this is a true and accurate statement of the city of lodging expenses and allowances incurred in the service of the State.

TOTAL COST
LESS ADVANCE
REIMBURSEMENT REDEPOSIT

CLAIMANT _____

I have examined this reimbursement request and certify that preapproval was obtained and it is just and reasonable.

DEPARTMENTAL APPROVAL _____	DATE _____	PROGRAM ACCOUNT (1) _____	AMOUNT _____
		PROGRAM ACCOUNT (2) _____	AMOUNT _____
		PROGRAM ACCOUNT (3) _____	AMOUNT _____

Contact: _____	Ext. _____
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DATE	TRAVEL (SHOW EACH CITY VISITED)		TRANSPORTATION				SUBSISTENCE			OTHER EXPENSES	
	FROM	TO	MODE	MILEAGE	*RATE	AMOUNT	TYPE	IN STATE	OUT-OF-STATE	EXPLANATION	AMOUNT
			R			0	B				
			A			0	L				
	TIME OUT:	TIME IN:	O			0	D				
			P			0.00	H				
						0.00	TOTAL	0.00	0.00		
			R			0	B				
			A			0	L				
	TIME OUT:	TIME IN:	O			0	D				
			P			0	H				
						0.00	TOTAL	0.00	0.00		
			R			0	B				
			A			0	L				
	TIME OUT:	TIME IN:	O			0	D				
			P			0	H				
						0.00	TOTAL	0.00	0.00		
			R			0	B				
			A			0	L				
	TIME OUT:	TIME IN:	O			0	D				
			P			0	H				
						0.00	TOTAL	0.00	0.00		
			R			0	B				
			A			0	L				
	TIME OUT:	TIME IN:	O			0	D				
			P			0	H				
						0.00	TOTAL	0.00	0.00		
			R			0	B				
			A			0	L				
	TIME OUT:	TIME IN:	O			0	D				
			P			0	H				
						0.00	TOTAL	0.00	0.00		

(1) Mode of Travel R-Rental Car A-Air O-Other (rail, bus, ship, etc.) P-Personally owned car	(2) Type of Subsistence In-State Out-of-State Breakfast \$8.40 \$8.40 Lunch \$11.00 \$11.00 Dinner \$18.90 \$21.60	TOTAL TRANSP. 0.00	TOTAL AUTH. SUBSISTENCE. 0.00 0.00	TOTAL MISCELLANEOUS 0.00
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IRS Rate = .545/mile