TRAVEL REIMBURSEMENT REQUEST FORM

Name:_____ PID #:_____

Home Address:_____City_____State_____Zip_____

Travel Destination (City)_____(State)_____ Funding source (Project ID #):_____

Conference name or Purpose of trip_____

Date of Travel_____   Return Date_____   Reimbursed mileage to RDU?

Departure Time on first day_____   Arrival Time on last day_____

Will any travel expenses be paid by an outside party?
_____

For Out of State travel, the food allowance is $44.10 per day (breakfast $9.00, lunch $11.80, dinner $23.30). **Please check which meals you want reimbursement for.** Guidelines for meal reimbursement on partial travel days: The traveler must leave before 6 AM to claim reimbursement for breakfast and before 10 AM to claim reimbursement for lunch. The traveler must return after 2 PM to claim reimbursement for lunch and after 8 PM for dinner. Please attach all receipts (taxi, hotel, parking, etc..). Food receipts are not needed if you are receiving the per diem amount. For international travel, ask M&ITravelAdmin@med.unc.edu for per diem amounts.

Daily Expenses	**Other Expenses (parking, taxi, etc.)**

Other Expenses (parking, taxi, etc.)

	Amount	**Date**	**Expense**	**Amount**

Amount
Breakfast_____
Lunch_____
Dinner_____
Hotel $_____
_____

Date   **Amount**
Breakfast_____
Lunch_____
Dinner_____
Hotel $_____
_____

Date   **Amount**
Breakfast_____
Lunch_____
Dinner_____
Hotel $_____
_____

Date   **Amount**

Other Expenses lines:
_____
_____
_____
_____
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_____
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_____
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_____

_ Did you rent a car?
If yes, explain why a rental car was needed_____
_____
_____
If foreign travel, what is the currency and exchange rate?_____

	Amount		**Date**	**Expense**	**Amount**
Breakfast_____			_____		
Lunch_____			_____		
Dinner_____			_____		
Hotel $_____			_____		

_____

Date **Amount**
Breakfast_____
Lunch_____
Dinner_____
Hotel $ _____

_____

Date **Amount**
Breakfast_____
Lunch_____
Dinner_____
Hotel $_____

_____

Date **Amount**
Breakfast_____
Lunch_____
Dinner_____
Hotel $_____

_____

Date **Amount**
Breakfast_____
Lunch_____
Dinner_____
Hotel $_____

_____

Date **Amount**
Breakfast_____
Lunch_____
Dinner_____
Hotel $_____

_____

Date **Amount**
Breakfast_____
Lunch_____
Dinner_____
Hotel $_____

_____