

# Travel Voucher Worksheet

Name: \_\_\_\_\_

Project(s) to charge: \_\_\_\_\_

Contact number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Department: \_\_\_\_\_

Check mailing \_\_\_\_\_

If available, do you want direct deposit:  Yes  No

address: \_\_\_\_\_

Home Institution: \_\_\_\_\_

U.S. Citizen?:  Yes  No

Destination: \_\_\_\_\_

If not a U.S. Citizen attach a copy of your VISA/Passport (non-UC employees only).

UC Employee?  Yes  No

UC Student/Postdoc?  Yes  No

**Purpose of trip:** \_\_\_\_\_

**Itinerary** \_\_\_\_\_

Exact date & time of departure (from home): \_\_\_\_\_ @ \_\_\_\_\_  AM  PM

Exact date & time of arrival (at destination): \_\_\_\_\_ @ \_\_\_\_\_  AM  PM

Exact date & time of departure (for home): \_\_\_\_\_ @ \_\_\_\_\_  AM  PM

Exact date & time of arrival (at home): \_\_\_\_\_ @ \_\_\_\_\_  AM  PM

If your itinerary is more complex, e.g. spent time at several sites, please use the back of this sheet to write it out in the same format as above or attach a separate sheet.

Any personal time taken on this trip?  YES  NO If yes, dates: \_\_\_\_\_

**Expenses:** Options Yes/No Amount to reimburse Notes

<b>Food:</b>	Actual amount spent: Please use back of sheet.	\$	<b>Maximum allowed rate is: \$64 per 24 hours (domestic rate) or call x for foreign rates</b>
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<b>Travel via:</b>	Airfare (Receipt is required*)	\$	Paid by ISBER or Traveler ? (Circle one) (Receipt is required even if paid directly by ISBER)*
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	<b>Private car use</b> ( <input type="checkbox"/> Confirm liability insurance approx. \$0.50/mile (Subject to change. Will reimburse at corresponding rate.)	Total miles driven:	<b>License plate #: REQUIRED</b> if claiming mileage or gas (on personal vehicle only). Can only claim one, gas or mileage.
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	( <input type="checkbox"/> Rental Car ( <input type="checkbox"/> UC Vehicle	\$	Gas: \$ Parking: \$
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	Train/Bus (Receipt required)	\$	Tolls: \$ Portorage: \$
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	Taxi or Ferry (boat) (Circle the appropriate one)	\$	If not all receipts available, # of trips
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<b>Lodging:</b>	Hotel** (Itemized receipt is required)	\$	Did you share a room? ( <input type="checkbox"/> Yes ( <input type="checkbox"/> No With whom? (Use back of page, notes to preparer.)
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**\*\*FOR HOTEL: CREDIT CARD CARBON COPIES OR STATEMENTS ARE NOT ACCEPTABLE. IF ITEMIZED RECEIPT IS NOT AVAILABLE, PLEASE CONTACT THE HOTEL AND REQUEST A FAX COPY BE SENT TO ISBER. REIMBURSEMENT WILL NOT OCCUR UNTIL COPY IS OBTAINED. Thank you.**

<b>Miscellaneous:</b>	Registration (Receipt is required)	\$	Abstract Fee: \$
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	Supplies (Receipts required)	\$	Phone/Fax: \$
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	Other Please explain.	\$	Excess Baggage: \$
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Are you being reimbursed from any other source?  Yes  No If so, what source: \_\_\_\_\_

What are they reimbursing you for and how much? \_\_\_\_\_

Did ISBER advance you money for expense or pay airfare, registration directly for you?  YES  NO

Amount requested as reimbursement: \$ \_\_\_\_\_  
(if paying back money, indicate with a minus or leave blank)

Amount to pay UCSB Corporate card: \$ \_\_\_\_\_  
(Amount you want ISBER to pay directly to your UCSB Corporate card.)

Traveler cannot sign as approval.

**TRAVELER'S SIGNATURE:** \_\_\_\_\_

**APPROVAL SIGNATURE:** \_\_\_\_\_  
(Not same as Traveler) Name & Title:

I CERTIFY THAT THE ABOVE IS A TRUE STATEMENT, THAT THE EXPENSES CLAIMED WERE INCURRED BY ME ON OFFICIAL UNIVERSITY BUSINESS ON THE DATES SHOWN, AND THAT I HAVE ATTACHED ORIGINAL RECEIPTS FOR EACH EXPENSE OF \$75 OR MORE, AS REQUIRED BY UNIVERSITY POLICY.

**REIMBURSEMENT WILL NOT OCCUR UNTIL APPROPRIATE RECEIPTS ARE SUBMITTED TO ISBER.**

