OPSU Travel Reimbursement Form

Name (Please Print) _____ **Banner ID**_____ **Date**_____

Name of Official Business/Meeting_____ **Date(s) of official business**_____

City & State of official business _____ **Begin/End time of official business**_____

Document each point visited - each day must be accounted for on this form. Include addresses of each point of travel If claiming mileage.	20_____ Month	Date	Mark "XX" if claiming Mileage	Number of Meals Provided or on Pcard w/ Team Travel Breakfast	Lunch	Dinner	Lodging amount if claiming
Example: Goodwell, OK - OPSU to OKC, OK - 321 Main Street	1	15	XX		1	1	$ 89.00
OKC, OK - 321 Main Street to Goodwell, OK - OPSU	1	16	XX	1			N/A

I am claiming -- Please check all that apply. Mark PCARD if you have charged an item on your OPSU Purchasing Card	
Lodging	
Per Diem	
Taxi	
City Bus	
Local Rental Car	
Registration Fee	
Business Telephone	
Parking	
Turnpike Tolls	
Fuel Charges	
Airfare	
Mileage	
Other	

If any part of travel was paid on a purchase order, please list all P.O. #'s and detailed explanation, e.g. Registration, Lodging, etc.

_____ _____ _____

List hotel if designated for meeting_____

Please provide documentation of designated hotel

License plate # if claiming mileage_____

Please Explain _____

Travel Reimbursement Form Checklist

- ☐ Conference/Meeting Agenda or other documentation (e.g. email, program, reg. form) attached
- ☐ **Original** Receipts Attached
- ☐ Is my form filled out completely?
- ☐ License Plate # if claiming mileage
- ☐ PCARD marked if used your purchasing card for any portion of trip

Notes/Details if any:_____

Please return this form to Abby Rice -- SL 137 -- Academic Affairs. If you have questions regarding travel reimbursement/policy please call Abby @ Ext. 1400