

## Reimbursement of Travel Expenses Checklist

## **SECTION ONE IS REQUIRED**

Travel reimbursement assistance is available through the department administrative office. The traveler/requester should complete the checklist below and provide <u>ALL REQUIRED</u> documentation when requesting reimbursement. Missing documentation is the responsibility of the traveler/requester. If <u>ALL receipts are received electronically, please forward completed form and receipts to Linda Heffernan, heffernl@email.arizona.edu</u>.

Nam	ne of Requesting Faculty/Staff:	EmpID:	Acct # to charge	Travel for	r (Check one):			TA#-(if known)	
				]   In-St	tate 🗌 Out	:-of-State	] *Foreign		
Purp	oose of Trip:		Location (City,		Departure Date:	Return Date:	days, ple Must pro	vel includes personal ase put dates on Page 2. vvide flight comparison ess period only.	
Designated Lodging (Check one): Yes No Was the room shared with anyone? (If yes, please list this individual, their affiliation to UA, reason for travel, and if they paid anything toward the expenses in the space below)									
	Teason for traver, and it tries paid anything toward trie expenses in the space below)								
SECTION TWO Documentation Required for Travel Reimbursement Assistance									
AirTravel:									
Documentation (such as e-ticket) and itinerary showing <b>proof of payment</b> .									
Any change fees or additional charges must have a valid business purpose. Explanation and supporting documentation must be submitted, this includes <i>proof of paymen</i> t.									
	Baggage checked. Original receipts showing <i>proof of payment</i> must be included.								
Grou	und Transportation:								
	FOR DOMESTIC TRAVEL: Receip	ots <b>REQUIRED</b> for <i>i</i>	ALL non-mass tra	nsit, parkin	g; actual amo	ounts for mass	s transit i.e.,	tolls, trains, bus <b>FOR</b>	
_ '	INTERNATIONAL TRAVEL: Original receipts for all ground transportation								
	Mileage - specify starting point and destination. Document with Goggle Maps, MapQuest or equivalent. If odometer, provide on Page 2.								
	Final itemized car rental showing <b>proof of payment</b> .								
	GAS: Original itemized gas recei	pts (showing numb	per of gallons and	price per ga	allon)				
Lodging Documentation:									
Final itemized hotel bill showing all hotel charge details with a \$0.00 balance and <b>proof of payment</b> .									
For designated hotels, a copy of page listing "designated hotel for conference/meeting with designated hotel rate" must be included to receive special hotel rate.									
<u>Busi</u>	ness/Conference Related M	leals:							
Meals are reimbursement limits for actual costs incurred, not per diems or fixed allowances. If claiming meal reimbursement, do NOT need receipts.									
	Check all meals provided as part of the conference/meeting. You may be reimbursed for other meals according to UA policy. Additional days on Page 3								
	Date: Date:	Date:	Date:		Date:	Date:		Date:	
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Registration Reimbursement:									
Copy of completed conference or meeting registration form showing <i>proof of payment</i>									
Copy of conference or meeting pro	gram/agenda noting if meals are	included in	n the event.						
Was a P-Card used for payment of any o	of these travel expenses? YES	NO	If yes, please remove expense from this form and submit Authorization Form.	on PCard					
Please add any comments/information that will help with reimbursement of your expenses. Provide odometer readings here.									
Submitted by:	Phone #:		Date Submitted:						
			<del></del>						

## **Business/Conference Related Meals:**

Meals are reimbursement limits for actual costs incurred, not per diems or fixed allowances.

Check all meals provided as part of the conference/meeting. You may be reimbursed for other meals according to UA policy.								
Date:	Date:	Date:	Date:	Date:	Date:	Date:		
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