Vandeventer Place Research Foundation

TRAVEL JUSTIFICATION / EXPENSE REIMBURSEMENT FORM

Date:	[Complete and submit to the Foundation office within 2 weeks of return	from <u>all</u> tra	vel]
Travel for (indivi	dual)		
For travel made	to (destination)		
From (date & tin	to (date & tin	ne)	
For (purpose)			
Charge to Found	ation Account		
	epenses – <u>Original receipts must be submitted for all</u> expen n. Prepaid items should be marked as PP.	ses inclu	ding those prepaid
Registration Fee	(receipt, program, or agenda, etc.)	\$	
Transportation	Air Fare* (ticket)	<i>\$</i>	
	Car rental – if approved	<i>\$</i>	
	Cab Fares	<i>\$</i>	
	Parking Fees	<i>\$</i>	
*If driving ow	n vehicle can receive mileage credit of .315/mile X Total Miles (or current IRS reimbursement rate) =	\$	
Lodging	nights @ \$ / night (attach original hotel bill) =	<i>\$</i>	
Meals	Actual expenses (up to \$50/day with actual receipts attached)	\$	
<u>or</u>	Per Diem rate X days (set by IRS for city travel- http://policyworks.gov/org/main/homepage/mtt/perdiem/download02.h.	\$ tml)	
Other (describe)		\$	
	Total Allowed Expenses	\$	
	Less Advance (check #)	<i>\$</i>	
	TOTAL AMOUNT TO BE REIMBURSED	\$	
Reimbursement i	s to be made to		
and that paymen expenditure was	ravel expenses set forth hereon are just and appropriate cl t has not been, nor will be accepted from, another source. necessary to support my approved research project, or in th travel was within the scope of the donor's intent.	I also cer	rtify that this travel
Principal investig	gator:	Date:	1 1
Approved by:	Approving Official for VPRF	Date:	