



Travel Reimbursement Form

Please note:

- Submit this form only **after** funding has been approved (via the "Request for Travel Funds" form).
- Travel reimbursement requests must be submitted **no later than 45 days from end of trip**.
- Complete applicable sections, attach all original receipts for expenses (including detailed flight itinerary when applicable) and return to department administrator in Gowen 225 or email asianlladmin@uw.edu
- As per state law, adding personal time to a trip must not increase the cost to the University. If personal time was taken during this trip, please provide comparison airfare.
- Fill out the table below and mark any non-applicable items with "N/A".

Travel Information			
Traveler Name:			
Purpose:			
Business Location: (City/State/Country)			
Departure Date:		Departure Time:	
Return Date:		Return Time:	
Personal Time Location(s):		Personal Time Date(s):	
Reimbursement Information			
Airfare:	\$	Registration Fee(s):	\$
Ground Transportation: (Taxi, Train, Parking, etc.)	\$	Lodging: (Attach Hotel Folio showing \$0 Balance)	\$
Other Expenses: (Itemize & explain)			
Per Diem Food Reimbursement Information			

*Meal receipts are not required. Meal reimbursements will be based on current per diem rates at the time the reimbursement is processed. Indicate individual meals you are claiming for per diem reimbursement:

Date _____	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Dinner <input type="checkbox"/>
Date _____	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Dinner <input type="checkbox"/>
Date _____	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Dinner <input type="checkbox"/>

Please list **any meals provided by the conference or event** here: _____

Total Food Reimbursement: \$

Total Reimbursement Amount Claimed: \$

Traveler Signature: _____

Today's Date: _____

OFFICE USE ONLY: