

<b>Travel Expense Reimbursement Form</b>			Name							
King's College 133 North River Wilkes-Barre, PA 18711			Address							
			City		ST, Zip					
Check Payable to:										
Purpose:										
Location(s):										
Date(s) Expenses Incurred:			Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total
Expense Item:										
1	Meals \$64/day max									0.00
2	Business Meals for Others									0.00
3	Air or Rail									0.00
4	Car rental									0.00
6	Other transportation/parking/tolls									0.00
5	Mileage reimbursement- personal vehicle	Miles								
		Rate .67								
		Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7	Hotel									0.00
8	Tips (non meal) \$7/day max									0.00
9	Registration									0.00
10	Other (explain)									0.00
* Detailed Explanation of Item 2 & 10									Total expense	0.00
Date	Name of Person(s)					Amount	Less advance			
							Less paid by P-Card			
							Subtotals		0.00	
							Due King's			
						Total of Line 5	0.00	Due Claimant		
Documentation for Missing Receipts										
Date	Description					Amount				
General Ledger Account			Account Name		Amount	Description				
			TOTAL		0.00					
Faculty / Staff Signature									(date)	
Department Chair/Vice President Signature									(date)	

For Business Office Use Only

Voucher Number \_\_\_\_\_

Assistant Controller Approval \_\_\_\_\_