

ORAU/ORISE TRAVEL EXPENSE STATEMENT

TRIP #: _____

Traveler Name: _____
 Address: _____
 Start Date: _____ End Date: _____

Destination #1: _____ **Start Date:** _____ **End Date:** _____ **Amount** _____
 Lodging Rate: _____ Tax: _____ # of Nights: _____ Total Lodging: _____
 Per Diem Rate: _____ # of Days: _____ Total Per Diem: _____
 Meals Provided: _____ Bkfst@ _____ Lunch@ _____ Dinner@ **Total Deductions:** _____

Destination #2: _____ **Start Date:** _____ **End Date:** _____ **Amount** _____
 Lodging Rate: _____ Tax: _____ # of Nights: _____ Total Lodging: _____
 Per Diem Rate: _____ # of Days: _____ Total Per Diem: _____
 Meals Provided: _____ Bkfst@ _____ Lunch@ _____ Dinner@ **Total Deductions:** _____

Item	Description	Amount
Rental Vehicle Expense:		
Rental Vehicle Gasoline:		
RT Mileage to/from Destination:	X 0.375	
Intracity Mileage:	X 0.375	
RT Mileage to/from Airport:	X 0.375	
Airport Parking:		
Hotel Parking:		
Telephone Personal:		
Telephone Business:		
ATM Expense:		
Ground Transportation:		
Other Expenses 1:		
Other Expenses 2:		
Other Expenses 3:		
Registration Fee:		
Airfare:		
TOTAL:		

ORAU/ORISE use only	Less airfare paid by ORAU:	
	Less hotel deposit paid by ORAU:	
	Less registration paid by ORAU:	
	Amount due to/from Traveler:	
Project/Task: _____		

Comments: _____

I certify that the travel expenses for this trip are correct and that I am not being reimbursed from any other source.

Signature of Traveler: _____ Date: _____