

WESTERN MICHIGAN UNIVERSITY TRAVEL EXPENSE VOUCHER

VOUCHER NO. _____

<http://www.wmich.edu/travel/>

EMPL ID _____ DATE _____

TRAVEL AUTH. # _____

PAYEE _____

ADDRESS _____

ADDRESS _____

DEPT. NAME _____ PHONE _____

UNIVERSITY EMPLOYEE ☒ YES ☐ NO

| | | | | | | | |
|---|---|---|---|----------------------------------|----------|--|--|
| | | | | | | | |
| 4 | 3 | 6 | 0 | <input checked="" type="radio"/> | INSTATE | | |
| 4 | 3 | 5 | 9 | <input type="radio"/> | OUTSTATE | | |
| 4 | 3 | 5 | 8 | <input type="radio"/> | FOREIGN | | |
| | | | | <input type="radio"/> | OTHER | | |

TRANSPORTATION (Please Attach Receipts) ☒ AIR ☐ RAIL OR BUS ☐ PRIVATE CAR

| Departure | Return | From | To | Car Miles |
|-----------|--------|------|----|-----------|
| | | | | |
| | | | | |
| | | | | |

| MILEAGE REIMBURSEMENT RATE | Total Car Miles | Mileage Expense | Ticket Expense (Attach air, rail, or bus receipt) | Total Transportation |
|----------------------------|-----------------|-----------------|--|----------------------|
| | | | | |

LODGING (Please Attach Receipts)

| Date | City, State | Hotel, Motel | Cost | Total Lodging |
|------|-------------|--------------|------|---------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Current Daily Standard Meal Per Diem: Breakfast \$11.00 Lunch \$12.00 Dinner \$23.00 Incidentals \$5.00 (Includes Tip)
Use 75% of full day per diem for first & last day.

| MEALS | G | Date | G | Date | G | Date | G | Date | G | Date | G | Date | G | TOTAL | Total Meals |
|-----------|---|------|---|------|---|------|---|------|---|------|---|------|---|-------|-------------|
| Breakfast | | | | | | | | | | | | | | | |
| Lunch | | | | | | | | | | | | | | | |
| Dinner | | | | | | | | | | | | | | | |
| Other | | | | | | | | | | | | | | | |

Use other box for incidentals or full day per diem rate *Please indicate number of Guests in columns marked 'G.'

Name & Title of Guest(s) _____

| OTHER TRAVEL EXPENSE (Please itemize) | OTHER COST | Total Other |
|---------------------------------------|------------|-------------|
| | | |
| | | |
| | | |

Other expenses include taxis, parking, baggage handling, telephone, etc.

ALL EMPLOYEE REIMBURSEMENTS ARE PAID VIA ACCOUNTS PAYABLE DIRECT DEPOSIT

Signatures

Traveler _____

Supervisor _____

Additional Approver _____

Business Purpose _____

Period Covered From _____ **To** _____

Audited by _____

Date _____

| |
|---------------------------------|
| Grand Total |
| |
| Authorized Reimbursement |
| |