

ESSIC Travel Expense Statement

- 1) Please fill out form completely and print it out.
- 2) Attach original receipts, airline tickets and stubs.
- 3) Send completed form with receipts attached to **ESSIC Business Office**

FRS # _____
 EBO TAR # _____
 Traveler Signature: _____

Name:

Employee or Visitor Social Security #:

Home Address:

Purpose of travel and destination:

Exchange rate (if applicable):

Please print and attach exchange rate for dates of travel from <http://www.oanda.com/converter/classic>

ITINERARY

Dates (MM/DD/YYYY)								
	Start	End	Start	End	Start	End	Start	End
Time								
From								
To								
Private Auto Mileage								

TRAVEL EXPENSES BY DATE

Dates (MM/DD/YYYY)								TOTAL
Breakfast** (\$9.00)								
Lunch** (\$11.00)								
Dinner** (\$25.00)								
Lodging								
Taxi or Limo								
Air/Rail/Bus								
Auto Rental								
Parking Fee								
Bridge or Tolls								
Telephone								
Registration Fee								
Porterage								

Private Auto Mileage* (please include in above itinerary)

miles@ per mile:

TOTAL EXPENSES:

***Private Auto Mileage Rates**

***56.0 cents/mile:**

Remarks: