



# PAUL SMITH'S COLLEGE

## Travel Expense Report

Advance  or Reimbursement  Date: \_\_\_\_\_ Department: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

### TRANSPORTATION

Date	Destination	Mileage*	current rate (2022 = 58.5 cents/mile)	Gas**	Cabs/UBER/LYFT	Tolls
SUBTOTAL						

\*use of own vehicle \*\*use of college owned vehicle

### MISCELLANEOUS & LODGING (PLEASE ATTACH RECEIPTS)

#### MEALS (NO RECEIPTS NEEDED)

Use either standard rate or Location rate per GSA at <https://www.gsa.gov/travel/plan-book/per-diem-rates>

Standard:

GSA Location: \_\_\_\_\_

Breakfast \$13 X # \_\_\_ Day(s) = \$ \_\_\_\_\_

Breakfast \$ \_\_\_ X # \_\_\_ Day(s) = \$ \_\_\_\_\_

Lunch \$ 15 X # \_\_\_ Day(s) = \$ \_\_\_\_\_

Lunch \$ \_\_\_ X # \_\_\_ Day(s) = \$ \_\_\_\_\_

Dinner \$ 26 X # \_\_\_ Day(s) = \$ \_\_\_\_\_

Dinner \$ \_\_\_ X # \_\_\_ Day(s) = \$ \_\_\_\_\_

Incidentals expenses \$5 X # \_\_\_ Day(s) = \$ \_\_\_\_\_

SUBTOTAL \_\_\_\_\_

Date	Location	Total Amount

MISCELLANEOUS & LODGING TOTAL: \$ \_\_\_\_\_

#### EXPENSE SUMMARY:

Transportation \$ \_\_\_\_\_

Meals \$ \_\_\_\_\_

Miscellaneous \$ \_\_\_\_\_

Lodging \$ \_\_\_\_\_

Less Owed Advance \$ \_\_\_\_\_

Amount Owed Individual \$ \_\_\_\_\_

Amount Owed College \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_ Account # \_\_\_\_\_

CHECK WILL BE: ( ) PICKED UP ( ) MAILED

SIGNATURE: \_\_\_\_\_

APPROVAL: \_\_\_\_\_