**Travel Expense Report**

|  |  |
| --- | --- |
| **Traveler Name** |  |

**Travel Details:**

|  |  |
| --- | --- |
| Depart Date & Depart Time |  |
| Return Date & Depart Time |  |
| Destination |  |
| Person(s) Visited |  |
| Purpose of Travel |  |
| Other OU Employees traveled with |  |

**Ground Transportation:**

|  |  |  |  |
| --- | --- | --- | --- |
| Ground Transportation (select one) | Personal (attach mileage map) | Rental | Motor Pool |
| Personal Vehicle Mileage | Total Miles Traveled: | Standard commute (if applicable): | Reimbursable mileage: |

**Per Diems and Reimbursements:**

|  |  |  |
| --- | --- | --- |
|  | **Date(s)** | **Descriptions(s)** |
| PCard Uses (dates/desc.) |  |  |
| Per Diem Needed (list dates/meals) |  |  |
| Cash Reimbursement (dates/desc.) |  |  |

|  |  |
| --- | --- |
| **Account Number (s) for report:** |  |

|  |  |
| --- | --- |
| **Comments:** |  |

Documents Included:

* TripIt/Agenda
* Hotel Receipts
* Flight Receipts
* Mileage Maps
* Other