**Travel Reimbursement Receipt Packet Cover Sheet**

Travel Start Date: Travel End Date:

Travel State Time: Travel End Time:

Note: Per ISU policy, Travel Start Time is when you left your home. Conversely, Travel End Time is when you returned to your home. Unless you are deviating from driving straight from airport to home(from workstation to airport or home to airport; whichever is less)

Receipt Checklist:

 Agenda Baggage

 # of Receipts:

 Airfare/Mileage\* Hotel

 Shuttle Service Other:

 # of Receipts:

 Cab Service Other:

 # of Receipts:

\* If flying locally or asking for mileage reimbursement be sure to include a comparison receipt and specifically note the savings in the comment section of this form.

Meals: Please check all that you are claiming, conference agenda must back up request

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 | Day 8 |
| Date |  |  |  |  |  |  |  |  |
| Breakfast |  |  |  |  |  |  |  |  |
| Lunch |  |  |  |  |  |  |  |  |
| Dinner |  |  |  |  |  |  |  |  |

**Please ATTACH an explanation of any deviations from or exceptions to travel policy incurred during this travel:**

 Employee Signature: