

**UNIVERSITY OF HOUSTON
DEPARTMENT OF CIVIL & ENVIRONMENTAL ENGINEERING**

TRAVEL VOUCHER

(Please complete immediately after the trip has been taken)

Speed Type # : _____ and Project ID # : _____

TRAVELER INFORMATION: Name/Title: _____ E-mail : _____

PSoft ID # : _____ Phone : _____

Classification (check one) : UH Employee University Guest Prospective Employee
 UH Student Contractor Other:

TRAVEL INFORMATION:

Travel Start Date : _____ Travel End Date : _____

Destination City : _____ State : _____ Country : _____

Purpose / Benefit : _____

FOR FOREIGN TRAVEL:

At the time of travel, foreign money exchange rate was: _____ foreign currency = _____ US\$

EXPENSES:

Description of Expenses	Amount (\$)
Airfare: \$ _____ + Rental Car: \$ _____ + Taxi: \$ _____ =	_____
Personal Car Mileage: _____ miles x _____ \$/mile =	_____
Meals: \$ _____ + Lodging: \$ _____ =	_____
Hotel Occupancy Tax: \$ _____ + City Tax: \$ _____ + State Tax: \$ _____ =	_____
Parking: \$ _____ + Fax: \$ _____ + Copies: \$ _____ + Phone Calls: \$ _____ =	_____
Train: \$ _____ + Bus: \$ _____ + Limo: \$ _____ + Shuttle: \$ _____ =	_____
Registration Fees: \$ _____ =	_____
Other travel expenses (itemized): _____ =	_____
TOTAL :	_____

MEALS & LODGING DETAILS:

(Do not include hotel taxes. Per Diem rates cannot exceed flat rates which are available on the UH website.)

Date	Per Diem Expenses			Actual Expenses		
	Meals	Lodging	Total	Meals	Lodging	Total
Total Per Diem Expenses:				Total Actual Expenses:		

I certify that the expenses shown above are correct and unpaid.

Traveler's Signature : _____ Date : _____

Supervisor/Unit Head : _____ Date : _____

- Not providing all the information and receipts requested will delay the processing of your travel reimbursement.
- Please attach mileage report and original receipts, including itemized meal receipts.
- Please tape receipts to a sheet of paper, do not overlap receipts or staple.
- Hotel receipts should show zero balance.
- Please make sure alcohol is not on any receipt, no alcohol consumption can be paid for during work hours 8 am - 5 pm (MAPP Policy).
- If you submit your travel reimbursement for payment more than 60 days from the date of your return, please attach a memo to the Vice President explaining reason for lateness and ask for approval signature.
- Please return form and receipts to Cherish Wallace's mailbox.