



# Travel Voucher

Illinois State University  
Normal, IL 61790

Voucher Number \_\_\_\_\_

Voucher Date \_\_\_\_\_

<b>1. Purpose of Travel</b>  Attended and presented at the Buiness Association conference 07/10-07/11/18 and preconference session on 07/09/18	<b>2. Traveler name and Address - Payee</b>  Jane Doe  Campus Box 4480		<b>3. UID #</b> 800-00-0000
			<b>4. Job Title</b> Graduate Teaching Assistant
			<b>5. Headquarters</b> ISU
			<b>6. Residence</b> Normal, IL
			<b>7. License Plate #</b> A11 4289

8. Date	9. Departed From		10. Arrived At		11. Auto Mileage	12. Auto Reimbursement @ .545	13. Trans	14. Lodging	15. Meals or Per Diem	16. Other Expenses		17. Line Totals
	Place	Time	Place	Time						Item	Amount	
7/8/2018	Normal, IL	9:00 AM	Madison, WI	1:00 PM	230	\$ 125.35		\$ 175.82		baggage	\$ 25.00	\$ 326.17
						\$ ---				shuttle and tip	\$ 19.00	\$ 19.00
7/9/2018						\$ ---		\$ 175.82				\$ 175.82
7/10/2018						\$ ---		\$ 175.82				\$ 175.82
7/11/2018						\$ ---		\$ 175.82				\$ 175.82
7/12/2018	Madison, WI	6:00 AM	Normal, IL	10:00 AM	230	\$ 125.35				shuttle and tip	\$ 21.00	\$ 146.35
						\$ ---				baggage	\$ 25.00	\$ 25.00
						\$ ---						\$ ---
						\$ ---				Registration	\$ 425.00	\$ 425.00
						\$ ---						\$ ---
						\$ ---						\$ ---
						\$ ---						\$ ---
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						\$ ---						\$ ---
						\$ ---						\$ ---
						\$ ---						\$ ---
					460.0	\$ 250.70	\$ ---	\$ 703.28	\$ ---	<b>Sub Totals</b>	\$ 515.00	

Exp. Obj.	<b>18. Notes</b>  <b>Put here who you shared lodging with and if you drove who you drove/rode with. Only put your license plate number on form if you drove your car.</b>	<b>19. Total Amount</b>	\$ 1,468.98
I291			Reimbursements should be submitted within 60 days of completion of travel; otherwise, the reimbursement may be considered taxable income.
I292			
Total Exp.			

I certify that, in accordance with Section 12 of "An Act in Relation to State Finance", the above amount is correct and just; that the amounts charged for subsistence were actually paid, and the expenses were occasioned by official business or unavoidable delays requiring my stay at hotels for the time specified; that I performed the journey with all practicable dispatch, by the shortest route usually traveled, in the customary reasonable manner, and that I have not been furnished with transportation or money in lieu thereof for any part; and that if reimbursement for use of a private automobile is requested, I am duly licensed and have in force at least the minimum liability insurance coverage required by the Illinois Vehicle Code.

<b>20. Traveler's Signature</b>	<b>21. Date</b>
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This certifies that the travel shown above was required by the official duties of the traveler named, to my personal knowledge, or as indicated by records submitted to me, and that I pre-approved any conference room rates that exceed the reimbursement schedule.

<b>22. Account Number</b>	<b>23. Account/Department</b>	<b>24. Approved Amount</b>	<b>25. Fiscal Agent Approval</b>