

Name _____ Date _____ Email _____

- I am submitting receipts **within 10 business days** of return from travel
- I am late in submitting receipts for the following reason: _____

Please provide the times of departure and arrival TO and FROM the conference.

GOING: On ____/____, I left my origin city ____:____ AM PM
 On ____/____, I arrived at the destination city ____:____ AM PM
RETURNING: On ____/____, I left the destination city ____:____ AM PM
 On ____/____, I arrived at the origin city ____:____ AM PM

Provide additional times and dates at the bottom of this form, if necessary

- I would like reimbursement for the following **MEALS** (per diem rate) that were NOT included in my hotel or airfare or conference:

*We do not take meal receipts as we use **per diem rates** only (\$8 Breakfast, \$10 Lunch, \$24 Dinner).

Please date and circle:

On ____/____ for Br, L, D, ALL On ____/____ for Br, L, D, ALL
 On ____/____ for Br, L, D, ALL On ____/____ for Br, L, D, ALL
 On ____/____ for Br, L, D, ALL On ____/____ for Br, L, D, ALL
 On ____/____ for Br, L, D, ALL On ____/____ for Br, L, D, ALL
 On ____/____ for Br, L, D, ALL On ____/____ for Br, L, D, ALL
 On ____/____ for Br, L, D, ALL On ____/____ for Br, L, D, ALL

Please fill in ALL columns for each expense:

Type/Description of Expense	Amount	ORIGINAL receipt enclosed	Bank STATEMENT/ online activity enclosed
1.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
2.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
3.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
4.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
5.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
6.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
7.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
8.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
9.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
10.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
11.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)
12.		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO (paid cash)

***REMINDER:** To avoid having future funds withheld, please remember to fulfill **1 hour of community service** per grant within 1 year of receipts submission and please submit a document of proof of this service to gsa@umbc.edu.*

THANK YOU ☺