

## AAUP-KSU Travel Expense Report

Please print or type												
Individual's Name					Address			City		State		Zip
Conference/Event					Role of Participant							
Date	Travel Destination	Transportation				Lodging	Meals			Miscellaneous		Total
		Air, Bus, Train, Etc.	Personal Auto		Other (taxi, etc.)		Per Diem		Per Receipt			
			Mileage	Amount			Check one:	Break	Lunch	Dinner	Amt.	
												\$ -
												\$ -
												\$ -
												\$ -
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												\$ -
												\$ -
												\$ -
<b>TOTALS</b>		\$ -	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
I hereby certify that the expenses listed above were incurred by me and are in compliance with AAUP-KSU travel policies and regulations.		Approval:					Date:			Less personal expenses, if any:		Subtract amount
										\$ -		\$ -
Signature of Traveler:						Date:			Amount to be reimbursed:		\$ -	
Attach original itemized receipts and submit to AAUP-KSU office within 30 days. For current mileage reimbursement figures, go to <a href="http://www.irs.gov">www.irs.gov</a> .												
Remarks:												