

# TRAVEL REIMBURSEMENT COVER SHEET

TRAVELER NAME:					TODAY'S DATE:			
EVENT NAME/REASON FOR TRAVEL:								
LOCATION:	TRAVEL AUTHORIZATION #:							
DEPARTURE: DATE	TIME	•	AM/PM	RETURN:	DATE	TIME	•	AM/PM

### **REQUIRED DOCUMENTATION**

The following documentation is <u>required</u> for all travel reimbursements.



COPY OF TRAVEL APPROVED AUTHORIZATION FORM # All travel must be approved via a travel authorization form.

**COPY OF TRAVEL ADVANCE** (if applicable)



#### COPY OF EVENT SCHEDULE/POSTER/PROGRAM

Proof of the event and your participation. This can be an original program or a copy from the conference website.



Receipts MUST be original, itemized, and show PROOF OF PAYMENT. e.g. A "zeroed-out" balance, shows charge to credit card on receipt.

#### AIRFARE ONLY: BOARDING PASSES & RECEIPT

If traveled by air, must include original boarding passes AND email receipt showing charge to credit card. Please note boarding passes and receipts are not necessary if they were charged directly to UConn Health through Sanditz.

#### MILEAGE ONLY: GOOGLE DIRECTIONS

If personal car was used, a print-out of Google Directions to reimburse mileage.

DEPARTURE ADDRESS

Total Miles

ARRIVAL ADDRESS

NORMAL COMMUTE MILEAGE

## **FOREIGN TRAVEL**

The following documentation is required for foreign travel only.

COPY OF EXCHANGE RATE FROM XE.COM <a href="http://www.xe.com/currencytables/">www.xe.com/currencytables/</a> This will be used to calculate your reimbursement for any receipts in foreign currency.