Travel Voucher

Date: _____

ID Number: _____

www.enmu.edu

Payee (Full, Legal Name): _____

Street or Station Number: _____

City: _____

☐ Reimbursement ☐ Advance ☐ Out-of-State Travel ☐ In-State Travel

For reimbursement of travel and other expenses, as itemized herein, incurred in the discharge of official duty.

Schedule A – Statement of Per Diem

Date	Hour of Departure	Hour of Return	Date	Hour of Departure	Hour of Return
				Total Days Claimed	

Schedule B – Statement of Transportation and Miscellaneous

Date	Show where traveled and how. Attach receipts for fares and other costs.	Receipt No.	Cost
		Total Transportation	$ 0.00

Schedule C – Itemized Statement of Actual, Necessary Personal Expenses; Attach Receipts

Date	Description	Receipt No.	Cost
		Total Personal Expenses	$ 0.00

Accounting Information

Department Account Numbers	Amount
	$
	$
	$
	$
	$
Total Expense	$ 0.00

Summary of Expenses

Total Per Diem (Schedule A above)	
_____ Days @ $_____ Per Day	$
Less Meals Provided	–
Total Transportation (Schedule B above)	0.00
Total Personal Expenses (Schedule C above)	0.00
Less Advance Received	–
Total Claimed:	$0.00

Purpose/Destination of Travel

Approval of Travel and Charge

I certify that the services have been performed and the expenses incurred as stated above were necessary and proper. This voucher has been examined, the total is just and reasonable, and no part thereof has been reimbursed.

Dean or Department Head Date

Signature Date

I hereby certify the above itemized account is true in all respects.

Signature of Payee Date

Payee's Title

Business Office Approval Date

Make a copy of this travel voucher for your records. Send original to the Business Office at station 4.