

LOCAL MILEAGE & CONFERENCE EXPENSE REPORT

Name of Employee:

Fund / Org No.:

Banner ID Number:

Org (Department):

Extension:

Mileage (One Way) All non-mileage expenses Totals Date From То Description Cost Purpose \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 TOTAL MILES 0.00 RATE PER MILE \$0.555 TOTALS \$0.00 \$0.00 \$0.00

ATTACH ORIGINAL RECEIPTS AND OTHER DOCUMENTATION FOR PARKING, TOLLS AND MISCELLANEOUS EXPENDITURES.

		FISCAL OFFICE ONLY:
Signature of Employee Approvals:	Date	
Chair, Director, Dean	Date	Fund/Org/Account (Mileage)
Grants Office (If Applicable)	Date	Fund/Org/Account (Mileage)
Dean/Vice President	Date	Fund/Org/Account (Other)
President FISCAL OFFICE APPROVAL	Date	Fund/Org/Account (Other)
Signature	Date	

Submit form to Controller's Office. A copy will be returned to the traveler.