THE RESEARCH FOUNDATION FOR THE STATE UNIVERSITY OF NEW YORK

Req#

Date

TRAVEL REIMBURSEMENT REQUEST

	so to be used	for rec	conciliation	of Tr	avel Advan	ice)						
Award Name PROJECT	TASK	Δ\Λ/	ARD	EXPE	NDITURE TY	DE		ORGANIZ	PI:	AMOUNT		
PROJECT	TASK	AVV	AND	EXFE	NDITURE IT	rc		UNGANIZ	LATION			
	1									\$		
		+								\$		
										\$		
NAME: (FIRST, M	IIDDLE INITIAL, L	AST)							SECURITY NUMBER: or 1st request)	TOTAL		
HOME ADDRESS	: (NUMBER & ST	REET)					R.F. EN	P TO PROGRA MPLOYEE	SUNY EMP			
							CONSU	JLTANT	LECTURER			
CITY:			STATE:	Z	ZIP CODE: (EXPLAII			.IN)				
						IF REQ	UIRED,	SPONSOR HA	S PROVIDED PRIOR API	PROVAL	YES	
POINT OF DEPAR	RTURE (address):			DATE	:	POINT	POINT OF RETURN (address):			DATE:		
ТІМІ				TIME	 ME:					TIME:		
DESTINATION AN	ID DUDDOSE OF	TD 41/1	- 1									
1st Day of Grant-Funded						AM		nal Day of ant-Funded	TIME		AM	
Travel:	TRANSPORTA		TIME:			PM		OTHER TRA	TIME:		PM	
	Personal Ca				N	/IETHOD I -	PER DI			ODGING & ME	EALS	
\$												
•	mile		X rate		No. of doub	Dete			No. of down			
\$	Common Ca	irrier			No. of days				No. of days			
Parking Car Rental				X=\$				Lodging \$				
\$(attach required justification)									Meal Allowance \$			
\$Tolls				MEAL ADJUSTMENT:				MEAL ADJUSTMENT:				
\$	Taxi					Breakfast	\$		Brea	kfast \$		
\$	Misc. (attach e	xplanatior	1)			Dinner	\$			inner \$		
\$	Misc. (attach e	xplanatior	n)		TOTAL		\$		TOTAL	(-)		
\$	TOTAL	(2)		F					rate, the Traveler MUST on the contract of the	rs.	equest for	
Transportation E	xpenses				(2) \$			Vendor #:	Vend Site:	or		
Per Diem/Meals	and Lodging				(3) \$			Invoice #:		ן ס ק		
Total Expenses	20 "		`		\$			Invoice Date:		By:		
Less Advance (F	P.O. #)		(1) \$			\$	Amount	ш Бу		
Balance Du	e Traveler				\$							
Balance Du	e RFSUNY (attac	h check	()		\$							
accounting is act	hat the above trip curate; that no po e balance indicate rel Policy. (If <u>PI</u> is	rtion ha	is been paid l e or reimburs	by a thi able in	rd party, exce	pt as stated	on this					
	TRAVELE	R SIGN	IATURE			DATI	E					
									ORSP SIGNATURE		DATE	
	ure is needed when								3.10. 0.010.110.11		2,112	
signatore cannot be	Dean, or Associate e a subordinate to the	e PI, or	have a conflict	of intere	st with the PI.							
PROJEC	T DIRECTOR SIG	SNATU	RE / Counter	r Signa	ture	DATI	E	OPER	ATIONS MANAGER SIGN	NATURE	DATE	

The Research Foundation for SUNY Attachment to travel Payment Request Form													
(The front of this form must also be filled out and signed)													
Name	Address												
Project		Award		Task									
Purpose of Trav	el												
_	Between W	What Points		Hour of	Hour of	Miles							
Date	From	To	Tolls	Departure	Arrival	Traveled							
				A.M. P.M A.M. P.M	A.M P.M A.M P.M								
				A.M.	A.M								
				P.M	P.M								
				A.M.	A.M 								
				P.M A.M.	P.M A.M								
				P.M	P.M								
				A.M.	A.M								
				P.M A.M.	P.M A.M								
				P.M.	P.M								
				A.M.	A.M								
				P.M	P.M								
				A.M.	A.M								
				P.M A.M.	P.M A.M								
				P.M	P.M								
				A.M.	A.M								
				P.M A.M.	P.M A.M								
				P.M	P.M								
				I									
		Total Tolls: Total Miles:											
was necessary	hat the travel indicated and on official business Foundation for SUNY	Signature o	f Traveler		Date								

RF Traveler's Responsibilities After a Trip

After the end of the trip, within a reasonable time, the traveler should document the actual costs of the trip. The traveler should submit a final travel payment request form. SUNY travel forms should not be used.

The form must include the business purpose and the duration of the trip as well as the details of the actual expenses incurred. For further details about each type of expense, contact ORSP 312-2888 or orsp@oswego.edu

Final Signature: The traveler's signature on the completed travel form is certification that the trip was taken for the indicated purposes, that the accounting is accurate and that allowances and reimbursements are calculated in accordance with this travel guide.

Final Receipts: The traveler must attach original receipts for all expenses claimed on the travel form, except for those items outlined in the Travel Guide for which receipts are not necessary. See individual sections of this guide for details on each type of expense. Justification and explanation, if required, must be attached to the form.