

**acuho-i Travel Expense Report**

Name \_\_\_\_\_ Address 1 \_\_\_\_\_ Purpose \_\_\_\_\_  
 Institution \_\_\_\_\_ Address 2 \_\_\_\_\_  
 Period \_\_\_\_\_ Address 3 \_\_\_\_\_ Budget Code \_\_\_\_\_  
 Per Mile Reimbursement 0.405 City, State Zip \_\_\_\_\_  
 Total Reimbursement Due **\$0.00** Phone \_\_\_\_\_ Email \_\_\_\_\_

Date (MM/DD/YY)	Description of Expense	Airfare	Lodging	Ground Transportation (Gas, Rental Car, Taxi)	Meals & Tips	Conferences and Seminars	Miles (Personal Car Only)	Mileage Reimbursement	Miscellaneous	Currency Exchange Rate	Expense Currency	U.S. \$
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
								\$0.00		1		\$0.00
<b>Total Mileage Reimbursement:</b>								<b>\$0.00</b>	<b>Total Reimbursement:</b>			<b>\$0.00</b>



Total Expenses \_\_\_\_\_ \$0.00  
 ACUHO-I Credit Card  
 Ductions \_\_\_\_\_  
 Balance Due Me \_\_\_\_\_ \$0.00

Signature \_\_\_\_\_  
 Date Submitted \_\_\_\_\_  
 Approved by \_\_\_\_\_  
 Date \_\_\_\_\_