

COLLEGE OF ARTS & SCIENCES

STUDENT TRAVEL SPENDING RECORD

Student		Department			
Student Address*		Cit	City		Zip
Name of Conference					
Destination					
Departure Date		Return Da	ite		
Source	Amount	Fiscal Offic	er Signature	Account #	Date
Student Contribution					
Department Acct.					
Foundation Acct.					
SRA/URCA Acct.					
CAS Activities				742019	
CAS ICR Acct.				741008	
Grad School Acct.				741008	
Additional Funding					
Total Spent					
Department Chair		Date	Faculty Mento	 or	Date

^{*}Address for any reimbursement