TRAVEL EXPENSE VOUCHER

Southern Illinois University Edwardsville

| Department | : Contact Info | rmatio | n | | Purp | ose of Tr | ip (state b | riefly) | P.D. | ОВЈ | FFY | Amou | ınt |
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| none No. # | | | Box: | | | | | | | | | | |
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| raveler Inforr | nation : Banner I | n· | | | | | | | Due Trave | er Amou | ınt | | |
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| | | | First Name: | | | | | | | | | | |
| | | | Apt No: | | | | | | | | | | |
| | | | time you submitte nanent Resident? | a a trave Yes | | Ye | es l | No | Lodging a available h | | | | |
| nerary | | | | | | | | | | | | | |
| | eparted from: ace | Time | Arrived at: Place | Time | Auto mileage @ . | 67 | Trans | Lodging | Meals or Per Diem | | er Exp | enses Amount | Line Total |
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| | AP Use Only | | | | | | | AP Use On | ly | from Page 3 | | | |
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| 1 of 3 | Entered by: Date: | | | _ | | | | | | | | | 2/24 |

TRAVEL EXPENSE VOUCHER

Southern Illinois University Edwardsville

| Name: | Last Name: | | First Name: | MI: | Banner ID: | | |
|----------------------|--|-----------------------|---------------------------------------|---|-------------------------------|--------------------|--------|
| Date | Expense Item | Justification | | | | | |
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| | | L | | | | | |
| Was a registratio | on fee paid? Yes | No | Date of meeting: | To | 1500 A | | |
| If yes, attach n | naterial which gives deta | ils of the fee paid. | | | LESS: Amount Not Allowed | | |
| | | | | | | | |
| Was a personal v | rehicle utilized? Ye | s No | | | Net Amount of Request | | |
| - | veler certifies that he/she vance set forth in the Illing | • | carries the minimum | | · | | |
| required insure | ance set forth in the film | ois neviseu statues. | | | LESS: Travel Advance | | |
| Was a University | vehicle used? Yes | s No | | | Advance | | |
| | | / - David | | | Amount Due | | |
| direct bill, TR forr | orms of University funds m, paid to vendor (AP-IDI |), paid by | Yes No | | Traveler | | |
| | ee) used to cover expense mize amount in justificati | | | | Amount Due | | |
| attach copies to v | | | | | Univ. (Attach Check) | | |
| certify that, in a | accordance with Section 1 | L2 of the State Fina | nce Act. the above amount | is correct and just; that the | detailed items charged for | subsistence were | |
| actually paid; tha | at the expenses were occ | asioned by official b | ousiness or unavoidable de | lays requiring the stay at ho customary reasonable mar | tels for the time specified; | that the journey | |
| • | money in lieu thereof fo | • | · · · · · · · · · · · · · · · · · · · | e customary reasonable mai | iller, and that I have not id | iriisiieu witii | |
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| | | | - - | ate | | | |
| Traveler Signa | ature | | | ate | | | |
| Payment of inter | est may be available if th | e State fails to com | ply with the State Prompt I | Payment Act. (30 ILCS 540). | | | |
| - | · | | | eler named to my personal | knowledge, or as indicated | by records | |
| | | | | eate the Bureau of Budget h | | <i>5</i> , 1000.00 | |
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| 1.000 | | | Budget Purpose | Fiscal Officer Signa | ture Date | Budget I | Durno |
| cal Officer Sign | nature | Date | budget ruipose | riscar Officer Signa | ture Dat | e buuget i | ruipos |
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| cal Officer Sign | nature | Date | Budget Purpose | Fiscal Officer Signa | ture Dat | e Budget I | Purpos |
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| hA | ditional Approval (wh | en appropriate) | Date | Additional Approval (| when appropriate) | Date | |

Additional Approval (when appropriate) Page 2 of 3

TRAVEL EXPENSE VOUCHER

Southern Illinois University Edwardsville

| Itinerary | Donartod from: | Ti | Arrived at: | Tires a | 1 | Auto | Trons | Lod-: | Modern | Othor F | noncoc | ling Tatala |
|--------------------|-------------------------|--------|----------------------|---------|------|-------------------|-------|---------|----------------------|------------------|--------|-------------|
| Date (mm-dd-yy) | Departed from: Place | Time | Arrived at: Place | Time | mile | Auto age @ .67 | Trans | Lodging | Meals or Per Diem | Other Ex Item | Amount | Line Totals |
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| | | Totals | s - Page 3 | \$ | L | | | | | | | |