

CLASS Reimbursement Request Form

EMPLOYEE NAME:			
VANDAL #:			
DESTINATION:			
DEPARTURE DATE:		DEPARTURE TIME:	
RETURN DATE:		RETURN TIME:	
INDEX NUMBER(S)		Last four digits of my p card (if applicable)	

Known Expenses (MUST BE PUT ON A P CARD)

Itemized Receipt Attached	Date on Receipt	Airline & Baggage Fees	Purchase Method	Purchase Amount
Itemized Receipt Attached	Date on Receipt	Rental Car Company-Decline insurance when using UI Purchasing Card	Purchase Method	Purchase Amount
Itemized Receipt Attached	Date on Receipt	(Exclude room service & personal expenses)	Purchase Method	Purchase Amount
Itemized Receipt Attached	Date on Receipt	Other (parking, rental car gas, shuttle/taxi, phone, misc. purchases associated with trip) include item	Purchase Method	Purchase Amount

Expense Total: \$

Mileage (to/from) List if roundtrip:

Date	Departure Location	Arrival Location	Total Mileage
TOTAL MILEAGE			miles or \$

Per Diem

Check each meal that you would like to request per diem is requested for; If meals are under an entertainment form, provided by a conference, ect, per diem cannot be requested. If per diem location varies by date, please specify in comments

Date(s)	Breakfast	Lunch	Dinner

Per Diem Travel Time Limits

Follow the below time table for claiming per diem on travel days

	Departure Time	Return Time
No Breakfast	7:00 a.m. or after	8:00 a.m. or earlier
No Lunch	11:00 a.m. or after	2:00 p.m. or earlier
No Dinner	5:00 p.m. or after	7:00 p.m. or ealier

Per diem rates can be viewed at <https://www.gsa.gov/travel/plan-book/per-diem-rates>

Notes/Comments

Signature of Employee

Date