## **GSA Conference Travel Grant Expense Request Form**

| Fu                                      | Full Name: John Doe UCR SID#: <u>861-00-0001</u>   |   |  |   |                             |   |
|---|--|---|--|---|-----------------------------|---|
| Ac                                      | Address: 123 Alphabet Ave, Riverside, CA 92507   |   |  |   |                             |   |
|   | Street City State ZIP  |   |  |   |                             |   |
|   | Name of Conference: Society of Missing Persons Annual Conference   |   |  |   |                             |   |
| Co                                      | Conference Location: San Francisco, CA   |   |  |   |                             |   |
| Du                                      | City  Purpose of Travel: presenting a paper at the conference  |   | Stat                                     | e                                       | Country                     |   |
|   |  |   |  | s: Los Angeles, (                       | CA                          |   |
| • |  | ty State  |  | *************************************** | ity                         | State   |
|   | Trip Begin Date: 01/01/2016  |   | Trip End Date: 01/05/2016                |   |                             |   |
|   | Trip Begin Time: 5:30 pm   |   | Trip End Time: 6:00 am                   |   |                             |   |
|   | Type of Expense  | se incidental expenses; visit o                               |  |   |                             | s if your dept pre-p<br>rse the checked exp<br>Amount |
|   | Airfare  | Ontario to San Francisco                                      |  |   | 7                           | \$150.49  |
| $\vdash$                                | Mileage  |   | ,  |   |                             | ,   |
|   | Other Transportation   | Shuttle, Ta   | ixi, Train                               |   |                             | \$128.96  |
|   | Lodging  | Stayed at t   |  |   |                             | \$503.70  |
|   | Registration   |   |  |   | <b>V</b>                    | \$230.00  |
|   | *Incidentals   | Meals, Membership, Insur                                      | ance, Abstr                              | act Fees, etc.                          |                             | \$35.55   |
|   | , , , , , , , , , , , , , , , , , , ,  | 1   | ·····                                    | Total Exp                               | oenses                      | \$1,048.70  |
| 16                                      | Please Explain Complicated Travel Details:  I ended my trip at LAX because it was cheaper. I shared a hotel room with a friend, but I paid for my share as  VS 4001 on the folio |   |  |   |                             |   |
| <u>V</u> 5                              |  |   |  |   |                             |   |
| Pl                                      |  | he source of your award (ex. of expenses, matching, etc.), of |  |   | <mark>a descriptio</mark> i | n of the award (e.                                    |
| Pl                                      |  | of expenses, matching, etc.), (                               |  | ard amount.                             | a descriptio                | n of the award (e.  Award Amount                      |
| Pl                                      | xed amount, balance  | of expenses, matching, etc.), o                               | and the aw                               | ard amount.                             | a description               |   |
| Pl                                      | Source of Award  | of expenses, matching, etc.), o<br>Descrip                    | and the awa                              | ard amount.                             | a description               | Award Amount  |
| Pl                                      | Source of Award Department   | of expenses, matching, etc.), o<br>Descrip<br>fix<br>fix      | and the awa<br>otion of Awa<br>ed amount | ard amount.                             | a description               | Award Amount<br>\$200.00                              |

I, the undersigned, do hereby testify that these expenses were submitted within 7 business days after my conference end date unless prior arrangements were made and approved by the committee chair and the expenses submitted represent my personal expenses. I have also read and understood all travel guidelines for my expenses and receipts. As indicated on my application, I will receive funding from other sources which If your dept/PI is reimbursing any of your are completely divulged here. expenses, please write who we should

Signature:

forward the receipt to here:
Forward To: Philosophy

<sup>\*</sup>All attached receipts must be dated, itemized, and original. It must also show proof of payment and the vendor's information. All documents, whether submitted by mail or in person, must reach the GSA front desk by the end of the 7 business days after the conference end date. We do not accept email or fax submissions. For more information on post-travel paperwork and expenses, please visit our website at http://www.gsa.ucr.edu/travelgrant.