



TRAVELER'S POST TRIP WORKSHEET

Please complete and submit this form upon completion of travel. Receipts are required for ALL expenses.

Traveler is responsible for knowing all UW Travel policies found here:

http://www.tacoma.uw.edu/finance-office/travel-services.

Expenses are reimbursed after the trip is complete with the exception of conference fees.

Date:	
Traveler Name:	
Event:	Location (city, state, country):
Departure Date & Time:	Return Date & Time:
Home Address (required in ARIBA reimbursement system):	
When a PERSONAL TIME IS TAKEN W	HILE TRAVELING before or after attending conference/event:
 It is the traveler's responsibility 	ty to supply documented <u>comparison of airfare</u> .
2. Lodging reimbursed for actual	l conference dates only.
3. Meals per diem are applied or	nly when in <u>travel status</u> .
4. Date and time of personal sta	tus started and ended
Pre Travel Authorization Form Registration Fee \$	Must include conference program or documentation showing meals, etc.) erence? No Yes (indicate below which meals)
Transportation (taxi, shuttle, Leaving: \$ Car Rental: \$ Gas for rental car: \$ Mileage (include a hard copy of the dates of arrival and departing to the dates of arrival systems of the dates of	of google maps indicating the to and from addresses)