Record of Travel
For Reimbursement of Expenses

Name: ______________________________

Destination: ______________________________

Dates of Travel: ______________________________

Personal Travel Dates
(if applicable)

		Date	Hour
Departed Headquarters	Austin, Texas		
Arrived			
Departed			
Arrived Headquarters	Austin, Texas		

Meals & Incidentals: Enter amount spent daily. Receipts and justifications may be required.

Date ____________ $ ____________ Date ____________ $ ____________

Date ____________ $ ____________ Date ____________ $ ____________

Date ____________ $ ____________ Date ____________ $ ____________

Date ____________ $ ____________ Date ____________ $ ____________

Lodging:

- Attach receipts reflecting payment and zero balances.
- If room was shared, claim only your portion of the costs.
- Texas State Occupancy Tax is not reimbursable. Tax exempt form must be provided to hotel.

Hotel Name: ______________________________

Date: ____________ Room Rate: $ ____________

Tax $ ____________

Room shared with: ______________________________

Hotel Name: ______________________________

Date: ____________ Room Rate: $ ____________

Tax $ ____________

Room shared with: ______________________________

Hotel Name: ______________________________

Date: ____________ Room Rate: $ ____________

Tax $ ____________

Room shared with: ______________________________

Parking Expenses:

Parking site: ______________________________ Cost: $ ____________

Parking site: ______________________________ Cost: $ ____________

Parking site: ______________________________ Cost: $ ____________

Parking site: ______________________________ Cost: $ ____________

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**** Must attach receipts unless otherwise indicated.**

Transportation: Airfare receipts must show your name, payment type, and charge paid. Itinerary is not reimbursable.

Airfare: $________________ **Rental Car: $**________________

☐ Direct billed/Centrally charged ☐ Direct billed/Centrally charged

Taxi: Receipts required for city to city travel, e.g., LAX to Pasadena.

Date: __________ From: ________________ To: ____________ Amount: $_________
Date: __________ From: ________________ To: ____________ Amount: $_________
Date: __________ From: ________________ To: ____________ Amount: $_________
Date: __________ From: ________________ To: ____________ Amount: $_________
Date: __________ From: ________________ To: ____________ Amount: $_________
Date: __________ From: ________________ To: ____________ Amount: $_________

Bus or Train: Receipts required, same as above.
(Circle one)

Date: __________ From: ________________ To: ____________ Amount: $_________
Date: __________ From: ________________ To: ____________ Amount: $_________
Date: __________ From: ________________ To: ____________ Amount: $_________
Date: __________ From: ________________ To: ____________ Amount: $_________

Personal Car Mileage: $0.70 per mile

Note: You cannot claim mileage AND gasoline, including using the direct-bill gas card.
Enter place of departure and destination. Travel associate will calculate mileage. Mileage log for inner city travel may be required.

From: ________________ To: _______________ Miles: __________
From: ________________ To: _______________ Miles: __________

Other Expenses:

Gasoline: $ ________________
Baggage Fee(s): $ ______________
Registration Fee(s): $ ____________

Miscellaneous: (explain purpose)

Other: $ ____________________
Other: $ ____________________
Other: $ ____________________