	Travel Expense Itemization Form		***Scholar Name:***			***Employee ID# 02-***	
	(Please add & delete rows as needed)						
			Mailing Address 1:				
	***Mentor Approval Attached** ☐		***Address 2:***				
			Address 3:				
			City, State, Zip:				
	Purpose of Travel						
	ITEM	**DATE**	**PURPOSE**	**AMOUNT**		**RCPT**	**FORM OF BACKUP**
	Airfare						e-ticket/original boarding pass
1							ticket stubs
2							
3							
4							
5							
				$0.00			
	Accommodations						hotel folio/receipt
6							
7							
8							
9							
10							
11							
12							
13							
				$0.00			
	Mileage						
14	*Rate per mile:*	0.585	*Number of miles traveled:*				
				$0.00			
	Car Rental, Fuel, Taxis, Shuttles, Parking, etc						
15							
16							
17							
18							
19							
20							
21							
				$0.00			
	***Meals & Incidentals**		domestic Per Diem rate $64.00				
22							
23							
24							
25							
26							
27							
				$0.00			
			Total:	***$0.00***			