



# Quincy University

## Itemized Travel Voucher

Please submit this form to the Business Office within three days of your return.

Traveler's Name: \_\_\_\_\_ Traveler's ID# \_\_\_\_\_

Date(s) of Travel: \_\_\_\_\_

Destination & Reason for Travel: \_\_\_\_\_

### Expenditures: *(Attach Receipts)*

#### Transportation:

\_\_\_\_\_ Bus \_\_\_\_\_ Train \_\_\_\_\_ Plane \$ \_\_\_\_\_

\_\_\_\_\_ Rental Car \$ \_\_\_\_\_

\_\_\_\_\_ Personal Car: Odometer Reading: Start \_\_\_\_\_ Ending \_\_\_\_\_

Total Miles \_\_\_\_\_ X \$0.58 = \$ \_\_\_\_\_

#### Lodging & Meals:

Motel \$ \_\_\_\_\_

Meals *(Include Tips)* \$ \_\_\_\_\_

#### Other Expenses:

*(Describe)*

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL EXPENSES** \$ \_\_\_\_\_

Advance \$ \_\_\_\_\_

If advance exceeds total expenses, enter amount. \$ \_\_\_\_\_

If total expenses exceed advance, enter here. \$ \_\_\_\_\_

Account Number Charged: \_\_\_\_\_

Approved by: \_\_\_\_\_  
Department Chair

\_\_\_\_\_  
Traveler's Signature