

RFT Number: \_\_\_\_\_

**College of Architecture  
Travel Expense Log**

Date: \_\_\_\_\_

Traveler: \_\_\_\_\_ Beginning Date of Travel: \_\_\_\_\_

Origin: \_\_\_\_\_ Ending Date of Travel: \_\_\_\_\_

Destination: \_\_\_\_\_ Time of Departure from College Station: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_ Time of Arrival to College Station: \_\_\_\_\_

Personal Days: \_\_\_\_\_ If no personal days check here: \_\_\_\_\_

**Airfare** – (original receipts required)

Dates: \_\_\_\_\_ Amount: \_\_\_\_\_

**Lodging** – (original itemized receipts required)

Hotel: \_\_\_\_\_ Hotel: \_\_\_\_\_

Dates of Stay: \_\_\_\_\_ Dates of Stay: \_\_\_\_\_

Total Bill: \_\_\_\_\_ Total Bill: \_\_\_\_\_

Room Shared with Employee? \_\_\_\_\_ Who? \_\_\_\_\_ Room Shared with Employee? \_\_\_\_\_ Who? \_\_\_\_\_

Single Room Rate: \_\_\_\_\_ Single Room Rate: \_\_\_\_\_

**Meals** – (original itemized receipts required)

<u>Meals</u>	<u>Dates of Travel</u>				
<u>Dates</u> - Ex. 10/24/03					
Breakfast					
Lunch					
Dinner					
Total					
Original itemized receipts required					
Breakfast					
Lunch					
Dinner					
Total					

Pay for someone else's meal(s)? List dates, amounts and names \_\_\_\_\_

**Registration** – (Proof of payment and conference brochure required)

Amount: \_\_\_\_\_ Conference Dates: \_\_\_\_\_

**Miscellaneous** – (original receipts required)

**Parking:** Dates \_\_\_\_\_ Amount \_\_\_\_\_

**Taxi:** Date \_\_\_\_\_ Amount \_\_\_\_\_ Origin \_\_\_\_\_ Destination \_\_\_\_\_

**Taxi:** Date \_\_\_\_\_ Amount \_\_\_\_\_ Origin \_\_\_\_\_ Destination \_\_\_\_\_

**Taxi:** Date \_\_\_\_\_ Amount \_\_\_\_\_ Origin \_\_\_\_\_ Destination \_\_\_\_\_

**Personal Car:** Origin \_\_\_\_\_ Destination \_\_\_\_\_

**Other:** \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_ Notes \_\_\_\_\_

**Other:** \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_ Notes \_\_\_\_\_

I certify that the above information is complete and accurate to the best of my knowledge, and I have informed the Business Office of any personal days and expenses while traveling. All receipts being claimed are for legitimate TAMUS business purposes only.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return this log along with all original receipts to the Business Office Travel Section within 15 days of returning.**