Name of Traveler: ___________________________________________  Email: ___________________________________________

Departure from West Lafayette:  _______________________________
Actual Date: __________  Time: __________
Return to West Lafayette:  _______________________________
Actual Date: __________  Time: __________
Destination(s): (list all) _______________________________________

Personal Time: (list dates) _______________________________________

Expenses: (mark & insert amount you wish to claim) (Concur will calculate amount)

☐ Mileage to/from ____________________________________________
☐ Parking $ __________________
☐ Airfare $ __________________
☐ Lodging ^^^ $ __________________
☐ Registration $ __________________
☐ Rental Car *** $ __________________
☐ Rental Car Fuel $ __________________
☐ Taxi/Shuttle to/from ________________________________________
☐ Taxi/Shuttle to/from $ __________________
☐ Train/Metro to/from $ __________________
☐ Per Diem/Subsistence (Concur will calculate daily rate)

* Indicate meals that were provided to you # of Breakfasts _____ Date(s) __________
# of Lunches _____ Date(s) __________
# of Dinners _____ Date(s) __________

If you wish to claim a reduced amount for per diem, enter here: $ __________________
☐ Other Expense ____________________________________________ $ __________________

*** Original Receipt Must be ITEMIZED to include room rate & tax for hotel and all charges for rental vehicle

Business Purpose for Traveling: (include names of Conference, Paper/Poster, University, &/or Collaborators)
__________________________________________________________________________________________
__________________________________________________________________________________________

PI or Faculty Name: ___________________________________________
Account(s) to Charge: ________________________________________

Upon completion of your trip, please indicate the expenses that apply below. Email this document along with applicable receipts for airfare, lodging, car rental, registration, membership dues & any other expenses exceeding $75.00 to costravel@purdue.edu.