

**Travel Expense Report
Iona College School of Arts & Science**

Faculty Member: _____ **Travel Dates:** _____

Mailing Address for Check: _____

Faculty ID: _____ **Purpose of Travel:** Conference Presentation

Department _____

	Monday	Tuesday	Wed	Thursday	Friday	Saturday	Sunday	Totals
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Transportation

700300	Domestic Airfare							
700350	International Airfare							
700250	Gas, Parking & Tolls							
700200	Taxis							
700000	Auto Rental							
	Total							

Lodging

700450	Hotels							
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Meals (Max \$35/day)

	Meals (Max \$35/day)							
700500	Total							

Other

700600	Registration Fees							
	Totals							

Mileage

	Actual Miles							
	Rate per mile							\$0.540
700150	Total							

Entertainment

	Explain below							
700550	Total							

Summary

Entertainment Detail

1.	
2.	

Cash advances provided

Charged to college

Reimbursement due

Authorized by Committee

Authorized by Dean

Faculty member's signature

Date

Please attach all receipts
updated: December 6, 2016