

# Sam Houston State University

## Travel Expense Report

Traveler Name \_\_\_\_\_ Sam ID: \_\_\_\_\_ Requisition: \_\_\_\_\_

Mailing Address \_\_\_\_\_ Partial Complete

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Requisition Amount: \_\_\_\_\_

Email \_\_\_\_\_ Travel Card Amount: \_\_\_\_\_

Department \_\_\_\_\_

Traveler Type: Student Employee Prospective Employee Guest

FOP(s) Fund Organization Account Program Amount


*If FOAP differs from original FOAP on requisition then initial for approval.*

FOAP Approval: \_\_\_\_\_

Depart Date: \_\_\_\_\_ Time: \_\_\_\_\_ Departure Address: \_\_\_\_\_

Return Date: \_\_\_\_\_ Time: \_\_\_\_\_ Travel Destination: \_\_\_\_\_

Carpooled with: \_\_\_\_\_

**Date      Daily Itinerary (Means of Transportation/Location/Duties Performed)      Pt to Pt Miles**


Registration Fee: \_\_\_\_\_ Conference/Event: \_\_\_\_\_

Mileage: \_\_\_\_\_ Miles @ .535 = \_\_\_\_\_ Parking: \_\_\_\_\_ Tolls: \_\_\_\_\_ Student(s) Total Expense: \_\_\_\_\_

Airfare: \_\_\_\_\_ Agency Fee: \_\_\_\_\_ Baggage Fee: \_\_\_\_\_ Rental Car: \_\_\_\_\_ Fuel: \_\_\_\_\_ Shuttle/Taxi: \_\_\_\_\_

*(Enter \$0.00 if Airfare & Agency Fee expenses are on ghost card. Separate section below for ghost card amount.)*

Date	Meal	Lodging	Hotel Taxes	Other/Misc	Notes
Totals:					

**Total Travel Expenses:      Total Due to Traveler:      Limited To:**  
**Travel Card Amount:      Total Due to SHSU:      Advance:**

**Ghost Card Airfare & Agency Fee Amount:** \_\_\_\_\_ *Provide invoice itinerary from CTP/Concur for verification of airfare purchase.*

Prepared By: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Signature/Date: \_\_\_\_\_  
 Traveler - I certify that the expenses are accurate and true.      Supervisor Signature \*Only Required by Travel Office  
*(if expenses are more than requisition)*

Grants Only:      Initial: \_\_\_\_\_ PI - Responsible for Grant      Initial: \_\_\_\_\_ Office of Research Administration

# Sam Houston State University

## Travel Expense Report Continuation Page

Traveler Name:

SamID:

Requisition:

Date	Daily Itinerary (Means of Transportation/Location/Duties Performed)	PT to Pt Miles

Daily Expense Log: Meal/Lodging/Hotel Tax/Misc					
Date	Meal	Lodging	Hotel Taxes	Other/Misc	Notes
Totals:					

Total Expense on Continuation Page: \_\_\_\_\_

