

Please rank this request:



**UNIVERSITY OF
SOUTH CAROLINA**

of

Return to Terri Lucas or scan to fltravel@mailbox.sc.edu. Please do not submit partially completed worksheets.

Your Name:

VIP ID:

Required: funding source	Example: Acct #, Commitment #, Award type, startup:		
Date Leaving Home Base	mm/dd/yy	Time:	AM/PM
Date Returning Home Base	mm/dd/yy	Time:	AM/PM
Specific purpose of Travel and destination			

Section I - Methods of Transportation

	Plane amount	\$
	Train amount	\$
	Bus amount	\$
PERSONAL VEHICLE MILEAGE	One way mileage/departure @ 50 cents / mile	\$
	One way mileage/return @ 50 cents / mile	\$
	SUBTOTAL SECTION I	\$

Section II - Subsistence

Lodging cost per night (including taxes): \$	per night X	nights =	\$
MEAL ALLOWANCES:			
In state B = \$6.00	L = \$7.00	D = \$12.00	\$ 25.00 per day MAX
Out-of-state B = \$7.00	L = \$9.00	D = \$16.00	\$ 32.00 per day MAX
Foreign rates: consult with Terri			
LIST YOUR MEALS HERE:			List the daily \$ here:
			\$
Daily allowance x # of days:			\$
City (country) and Dates: (# days x foreign rate-consult with Terri)			\$
SUBTOTAL SECTION II			\$

(If meals were provided as part of registration, you cannot claim the expense). Meal receipts are not required. Out of country per diem is based on country and city.

Section III – Other Expenses (ORIGINAL RECEIPTS MUST BE PROVIDED FOR THIS SECTION)

	Registration	\$
	Taxi, shuttles, subways	\$
	Airport/Hotel parking	\$
	Rental car	\$
	Gas for rental car only, not personal vehicle	\$
	Other	
	SUBTOTAL SECTION III	\$

Section IV - Summary

	Section I Transportation	\$
	Section II Subsistence	\$
	Section III Other	\$
	GRAND TOTAL REQUESTED	\$

TOTAL APPROVED: \$ _____

Chair’s Approval _____ Date: _____ Graduate Director’s Approval _____ Date: _____