Ball State University
Travel Expense Voucher

Account Number	Dates of Travel	Amount

Name _____

Department _____ ☐ Mail to Campus Address

Purpose of Trip _____ ☐ Mail to Home (Include Address)

Date 20___ mm/dd	From	To	Time of Departure/ Return	Subsistence Periods 1	2	3	4	Amount	Lodging Amount

This section must be completed

Was the registration fee paid directly by the University?

☐ No ☐ Yes, $ _____

Were any meals included in registration or otherwise furnished?

☐ No ☐ Yes, (Complete Meals Furnished Section)

Meals Furnished Section

_____Breakfast(s) at $ 6.50 = **0.00**

_____ Lunch(es) at $ 6.50 = **0.00**

_____ Dinner(s) at $ 12.00 = **0.00**

Less total meals furnished **0.00**

Sub-Total **0.00**

0.00

(b) Total Subsistence **0.00**

Total Lodge **0.00** **a**

0.00 **b**

Transportation and Miscellaneous

Description	Amount	Description	Amount
Registration, if not paid by university		Parking	
Airfare		Bus	
Personal Car		Taxi	
First 500 miles_____ miles at **$0.40**	**0.00**	Car Rental	
Next 2500 miles_____ miles at **$0.20**	**0.00**	Road Tolls	
Over 3000 miles_____ miles at **$0.10**	**0.00**	Other (specify)	
		Other (specify)	
		(c) Total Trans & Misc.	**0.00**

BSU TRAVEL MANUAL

0.00 **c**

Total (a+b+c) **0.00**

Maximum Travel Authorization _____

Less Registration paid by university _____

Max payable to claimant _____

Cash Advance issued _____

Amount owed University (Attach check payable to BSU. Do not send cash) _____

Amount payable to traveler _____

Certification: I certify that the expenses on this voucher were incurred while in University travel status and are allowable expenses in accordance with University Travel Regulations.

Traveler Signature _____ Date _____

Department Signature _____ Date _____

_____

Accounting signature/date

Form B-111 Approved by the State Board of Accounts for Ball State University, 1991, Revised 1992, 1993, 2001, 2004