

## SARE TRAVEL EXPENSE REIMBURSEMENT FORM

Edited 6/26/24

NAME:		E-mail:		Complete <b>mandatory</b> online form: <a href="http://suppliers.uga.edu">http://suppliers.uga.edu</a>			
Address:				Phone Number:			
City:		State:	Zip Code:	LOCATION & DATES:			
<i>Please provide the following information for expenses you incurred while in travel status.</i>							
Meals: (REIMBURSED at per diem rates <b>*NO receipts required</b> – Per Diem applies to all reasonable days prior to or following the meeting.) Do not put amounts for <b>CATERED MEALS</b> . 75% of Daily Per Diem will be reimbursed for days of departure and return.		Day of Departure					Day of Return
		___/___/___ <b>75% Per Diem Rate</b>		___/___/___	___/___/___	___/___/___	___/___/___
Breakfast		75% Rate					75% Rate
Lunch		75% Rate					75% Rate
Dinner		75% Rate					75% Rate
Lodging: ( <b>ORIGINAL receipt required</b> ; enter the cost for each night, <b>omitting other charges and incidentals</b> such as alcoholic beverages.) *							
Airline Ticket ( <b>ORIGINAL passenger receipt</b> or Confirmation (if paid online) required <i>unless pre-paid by SARE</i> )							
Taxi Fare and/or Airport or Hotel Parking / Toll Charges ( <b>ORIGINAL receipts required</b> )							
Personal Vehicle Expense (this includes departure and return mileage from your home/workplace to the airport or meeting) \$0.70/mile x _____ miles <b>Odometer readings:</b> include starting and ending odometer readings. Start _____ End _____							
Rental Vehicle Expense ( <b>Hertz or Enterprise</b> ) ( <b>ORIGINAL receipts required</b> )							
Registration ( <b>ORIGINAL receipt required</b> )							
Non-Employee Payment Form or Other Miscellaneous Expenses ( <b>ORIGINAL receipts required</b> )							
<b>TOTAL</b>							

- Note: **Travel expenditures must be filed within 20 days of the completion of the travel event.**
- Phone charges on hotel invoices will be reimbursed up to \$5.00.
- Exceptions: Catered Meals or Meals at specified restaurants in which case a receipt must accompany reimbursement request.
- **\*\* When going to website, look for City and State where meeting is being held and subtract the incidentals (incidentals are not reimbursable).**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please mail completed form with NON-EMPLOYEE PAYMENT FORM and ORIGINAL receipts to Kayla Martin, 1109 Experiment Street, Stuckey Building, Room 203, Griffin, GA 30223  
 Please call Kayla Martin at 770-412-4787 or email [kayla.martin2@uga.edu](mailto:kayla.martin2@uga.edu) if you have any questions.