

TRAVEL SUMMARY

Please submit this document with all signed receipts, itinerary, and conference agenda to:
Whitney Finto (finto@ksu.edu).

Name and Title of Traveler _____

Additional Travelers _____

Destination _____

Reason for Travel _____

Date Left _____ Time _____ AM PM

Date Returned _____ Time _____ AM PM

Expense Report

Expenses	Personal Funds Used	KSU Company Card	Signed Receipt Attached	Amount
Flights				\$ _____
Baggage Fees				\$ _____
Shuttle/Taxi				\$ _____
Parking Fees				\$ _____
Tolls				\$ _____
Car Rental				\$ _____
Car Rental Shared With: _____				
Lodging				\$ _____
Lodging Shared With: _____				
Registration				\$ _____
Additional Expense:				\$ _____
Additional Expense:				\$ _____
Additional Expense:				\$ _____

Meals Provided or Included with Registration/Conference:

Date	Breakfast	Lunch	Dinner	Date	Breakfast	Lunch	Dinner
_____				_____			
_____				_____			
_____				_____			

Traveler Name & Signature
