**STUDENT TRAVEL REIMBURSEMENT FORM**
***Attach all receipts***

NAME: _____

Student ID: _____

PURPOSE OF TRAVEL: _____

DESTINATION(s): (City, State) _____

DATE/TIME of Departure: _____ Time: _____:____ AM or PM

DATE/TIME of Return: _____ Time: _____:____ AM or PM

| **TRANSPORTATION** | | | **AMOUNT** |
|---|---|---|---|
| **AIRFARE:** | | | |
| Paid by Law Center? Check one. | YES | NO | |
| Paid by individual? Check one. | YES | NO | $ |
| Mileage to OKC airport? (52 miles round trip x .50 = $26.00) | | | $ |
| **CAR TAG- You must provide a tag number if any auto expenses (mileage or parking) are claimed:** | | | |
| **TRAVEL BY VEHICLE:** | | | |
| (Circle One) | Personal Vehicle* | Motor Pool Vehicle | $ |
| *If using Personal Vehicle enter amount to be reimbursed (.50/mile) & provide comparison airfare if traveling out of state. | | | |
| **LOCAL TRANSPORTATION:** | | | |
| SHUTTLE: | | | $ |
| TAXI: | | | $ |
| RENTAL CAR: | | | $ |
| OTHER LOCAL TRANSPORTATION: | | | $ |
| **PER DIEM: (Student per diem is $46.00 per each 24hour period minus $11.50 for each meal provided)** | | | |
| Were any meals provided at event? | YES | NO | $ |
| If so, how many? | | | |
| **LODGING:** | | | $ |
| If room was shared- Name of roommate(s): | | | |
| **MISCELLANEOUS EXPENSE:** | | | |
| TELEPHONE (university business only): | | | $ |
| PARKING/TOLL ROAD FEES: | | | $ |
| OTHER: | | | $ |
| **TOTAL TRAVEL EXPENSES CLAIMED** | | | **$** _____ |

**NOTES:**