NORTH DAKOTA STATE COLLEGE OF SCIENCE
TRAVEL EXPENSE VOUCHER

Voucher # _____
Ent. _____
Ck. # _____

NAME _____ EMPL ID _____

DEPARTMENT _____ ADDRESS _____ PHONE _____

PURPOSE OF TRAVEL _____

YEAR			OUT-OF-STATE TRAVEL				IN-STATE TRAVEL						
											521010(InS)	521065	
			521035	521080	521075	521090	521035	521020	521015	521030	521070(OoS)	521005	
			MEALS				MEALS						
DATE	POINTS COVERED BY TRAVEL	DEPARTURE AND RETURN TIME	TAXABLE	NON-TAX	LODGING	VEHICLE MILES	TAXABLE	NON-TAX	LODGING	VEHICLE MILES	AIR TRANS IN/ OUT OF STATE	OTHER TRANS AND REG EXP	NOTE *
		TOTALS	$0.00	$0.00	$0.00	0	$0.00	$0.00	$0.00	0	$0.00	$0.00	
			521035	521080	521075	$.45 x mi $.18 x Mi	521035	521020	521015	$.45 x Mi	521010 / 521070	521065	
						521090				521030			
						$0.00				$0.00			

I hereby certify this itemized statement representing a claim for per diem, mileage and/or travel expenses or combination thereof is truthful and accurate.

_____
Signature Date

_____
Signature-Department Approval Date

_____
Signature-Department Approval Date

Audited _____

Misc. Expense Detail *(Details for note column above)

	ACCOUNT	FUND	DEPT	PROG	PROJ	AMOUNT
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

$0.00 **Amount Authorized**