



**Expense Summary:**

Airfare paid by CTA? YES NO If YES, attach copy of CTA form JSIS-92, including amount \$ \_\_\_\_\_

Airfare paid by traveler? YES NO If YES, attach copy of itinerary and payment made

Airfare \$ \_\_\_\_\_ Registration Fee \$ \_\_\_\_\_  
*(do not include if by CTA)*

**Ground Transportation:**

Vehicle Travel (check if appropriate) Train Limo Taxi Bus Amount \$ \_\_\_\_\_

Auto Rental \$ \_\_\_\_\_ Parking \$ \_\_\_\_\_ Ferry \$ \_\_\_\_\_

Mileage \_\_\_\_\_ miles @ \$0.535 per mile = \$ \_\_\_\_\_  
*Mileage to/from SeaTac Airport is limited to 40 miles per round trip or \$21.40; provide a print-out of your mileage from Mapquest for all trips.*

Hotel Name \_\_\_\_\_ Hotel Amount \$ \_\_\_\_\_

**You must attach conference registration and/or agenda.**

**Meal Per Diem Calculations**

Do you want to claim meal per diem? NO YES (ALL ELIGIBLE MEALS) YES (ONLY SPECIFIC MEALS & DATES LISTED BELOW)

*you must attach airfare itinerary*

Will individual receive an honorarium, or professional service payment? Yes No

If yes, attach itemized receipts.

**GRAND TOTAL TO BE REIMBURSED \$ \_\_\_\_\_** (plus per diem, if any)

Will you be submitting additional receipts? Yes No

If yes, we will hold this reimbursement request until we receive the additional receipts.

I certify or declare that the charges listed herein are for legitimate University of Washington business.

Signature \_\_\_\_\_ *(person to be reimbursed)*

**Submit form to: JSIS Accounts Payable, Thomson Hall 4<sup>th</sup> floor Mailroom**  
This form shall not be reproduced by units other than the Jackson School without written permission.