

**Rebuilding the New Orleans Region:  
Infrastructure Systems and Technology  
A Two Day Forum  
September 24-26, 2006**

**TRAVEL EXPENSE STATEMENT**



Travel reimbursement maximum is \$500 for out-of-state and \$150 for in-state participants and speakers

NAME \_\_\_\_\_  
   Last  First  Middle Initial

TITLE \_\_\_\_\_

RESIDENCE \_\_\_\_\_

\_\_\_\_\_

TRIP PURPOSE \_\_\_\_\_

\_\_\_\_\_

|  | Date                                 | DETAILS OF MEALS<br>Report Actual Expenses |       |          |               |      | TOTAL |
|--|--------------------------------------|--|-------|----------|---------------|------|-------|
|  |                                      | B'fast                                     | Lunch | Dinner   | Meal Subtotal |      |       |
|  |                                      |  |       |          |               |      | \$ -  |
|  |                                      |  |       |          |               |      | \$ -  |
|  |                                      |  |       |          |               |      | \$ -  |
|  |                                      |  |       |          |               |      | \$ -  |
|  |                                      |  |       |          |               |      | \$ -  |
|  |                                      |  |       |          |               |      | \$ -  |
|  |                                      |  |       |          |               |      | \$ -  |
|  |                                      |  |       |          |               |      | \$ -  |
| <b>Subtotals</b>   |                                      | \$ -                                       | \$ -  | \$ -     | \$ -          |      | \$ -  |
| <b>MILEAGE:</b>  | _____ 0 _____                        | MILES @ _____ 0.445 _____                  |       | PER MILE |               |      | \$ -  |
| (Must be supported by automobile mileage record on reverse side) |                                      |  |       |          |               |      | \$ -  |
| <b>TRANSPORTATION</b>  | \$ _____ -                           | Reimbursed to Traveler:                    |       |          |               |      | \$ -  |
| <b>MISCELLANEOUS EXPENSES</b>                                    | (Explain in section on reverse side) |  |       |          |               | \$ - |       |
| <b>GRAND TOTAL DUE TO TRAVELER</b>                               |                                      |  |       |          |               |      |       |

To process your reimbursement, please attach receipts and send this form to:

Andrea Bé (404) 894-2202

Georgia Institute of Technology, School of Civil and Environmental Engineering, 790 Atlantic Drive, Atlanta, GA 30332-0355

Name \_\_\_\_\_

### AUTOMOBILE MILEAGE RECORD

Prepare daily, using a separate block for each day's travel and for each departure from headquarters.

VEHICLE LICENSE NO. OF CAR \_\_\_\_\_

STATE OF LICENSE PLATE \_\_\_\_\_

| DATE and DAY OF WEEK | DAILY TRAVEL (Points Visited)                  | ODOMETER READING |        | MILES TRAVELED       |         |   |
|----------------------|--|------------------|--------|----------------------|---------|---|
|                      |  | Starting         | Ending | Miles Daily          | Mileage |   |
|                      | FROM: _____ TO: _____<br>Points Visited: _____ |                  |        |                      |         |   |
|                      | FROM: _____ TO: _____<br>Points Visited: _____ |                  |        |                      |         |   |
|                      | FROM: _____ TO: _____<br>Points Visited: _____ |                  |        |                      |         |   |
|                      | FROM: _____ TO: _____<br>Points Visited: _____ |                  |        |                      |         |   |
|                      | FROM: _____ TO: _____<br>Points Visited: _____ |                  |        |                      |         |   |
|                      |  |                  |        | TOTAL MILES TRAVELED |         | 0 |

| Date   | TRANSPORTATION<br><small>Airfare must be supported by passenger ticket. All other transportation must be supported with receipts.</small> | Amount |
|--|---|--------|
|  | <b>AIRFARE -</b>  |        |
|  | <b>TAXI/SHUTTLE</b> -Receipts or destinations   |        |
|  | <b>OTHER</b>  |        |
|  | <b>RENTAL CAR</b>   |        |
| <b>TOTAL TRANSPORTATION EXPENSES</b>   |   | \$ -   |
| REASON FOR NON USE OF AIR CONTRACT<br><input type="radio"/> CONTRACT FARE UNAVAILABLE <input checked="" type="radio"/> OTHER (EXPLAIN): _____<br><input type="radio"/> FARE AUTHORIZED BY SPONSOR      _____<br><input type="radio"/> SCHEDULING REQUIREMENTS      _____ |   |        |

| Date                                | MISCELLANEOUS<br><small>(Explain charges and attach receipts, except for telephone calls. Justify each telephone call greater than \$3.00. Include person contacted and purpose.)</small> | Amount |
|-------------------------------------|---|--------|
|                                     |   |        |
|                                     |   |        |
|                                     |   |        |
|                                     |   |        |
|                                     |   |        |
|                                     |   |        |
|                                     |   |        |
| <b>TOTAL MISCELLANEOUS EXPENSES</b> |   | \$ -   |

TRAVELER'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_