

INFORMATION FOR TRAVEL EXPENSE VOUCHER (TEV)

NAME: _____ **EMAIL** _____

UCSD has an e-travel system that requires e-mail certification from the traveler to issue the check. An automated message will be sent to the e-mail address you provide from mytravel-admin-l@ucsd.edu with the subject line "MyTravel Certification Request". Your payment will not be processed until you respond to this automated message.

SOCIAL SECURITY NUMBER: _____

US CITIZEN Yes ___ No ___ **VISA STATUS (REQUIRED)** _____
(Passport and visa copies required for international visitors. Academic Certification forms required for B1/B2, WB/WT visas)

BUSINESS ADDRESS: (Visitors Only)

HOME ADDRESS: (Visitors Only)

DESTINATION: _____

PURPOSE OF TRAVEL: _____

DATE TRAVEL STARTED: _____ **Departure Time:** _____

DATE TRAVEL ENDED: _____ **Return Time:** _____

UC EMPLOYEES (Use Intercampus travel OR list Campus/Department): _____

Unallowable expenses: Late charges, communication/fax/phone/internet, entertainment, alcohol, travel and/or rental insurance and visa/passport fees. Detailed itemized receipts required for auditing meals.

Type of Travel Expense	# of Days	Daily Amount (Includes tax)	Total Amount of expense
LODGING			
AIRFARE			
PERSONAL CAR Mileage: _____ License Plate#: _____			
OTHER transportation			
AUTO RENTAL <i>Insurance fees are not reimbursed</i>			
TAXI and/or PARKING			
REGISTRATION			
MEALS/Incidentals <i>Itemized receipts required</i>			
FOREIGN Per Diem			

HONORARIUM Yes ___ No XX Amount \$ _____ (Not allowed on Federal funds)

UCSD Honorarium Policy: UCSD allows honorarium at the rate of \$250/day maximum for no more than 3 days per event. Payments for international visitors require: Social Security#; Academic Certification form, WBEN & 8223 forms.

TO BE FILLED OUT BY DEPARTMENT **TRIP EVENT #** _____

TRAVELER \$ _____ **UC Travel Card \$** _____ **TO UC \$** _____

PI APPROVAL _____ **DEPT. AUTHORIZATION** _____

FUNDING SOURCE: _____

Source Name	Index	Fund	Account
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