



# Travel Voucher 2024

Rev. 1/29/24

**Instructions:**

- 1) Reimbursement is limited to ordinary and necessary business expenses. RFMH Travel Policy must be observed.
- 2) Each trip must have a stated purpose and destination listed.
- 3) All receipts, including those on RFMH credit cards, and conference program (if applicable) must be attached.
- 4) If travel extends for any reason beyond the official trip, PRIOR APPROVAL MUST BE ATTACHED.
- 5) SUBMIT VOUCHER WITHIN 2 WEEKS OF YOUR TRIP.

<b>SOCIAL SECURITY NO. (Last 4 digits only)</b>	<b>FOREIGN NATIONALS</b>	<b>LOCAL ACCOUNT</b>	<b>PROJECT</b>	<b>TASK</b>	<b>AWARD</b>	<b>EXPENDITURE TYPE</b>
	<b>COUNTRY &amp; VISA TYPE</b>					<input type="checkbox"/> TRV Domestic Travel <input type="checkbox"/> TRV Foreign Travel
		<b>ORGANIZATION</b>	<b>TRAVELER IS EMPLOYED BY:</b>			
<b>TRAVELER'S NAME &amp; HOME ADDRESS</b>			RFMH <input type="checkbox"/> NYS <input type="checkbox"/> Other <input type="checkbox"/> Check One →			

<b>Work Unit and Location</b>	<b>Trip 1 Departure</b>			<b>Trip 1 Return</b>			<b>Purpose and Destination of Trip 1</b>			
	<b>Date</b>	<b>Time</b>	<b>Check One</b>	<b>Date</b>	<b>Time</b>	<b>Check One</b>				
			<input type="checkbox"/> AM <input type="checkbox"/> PM			<input type="checkbox"/> AM <input type="checkbox"/> PM				
	<b>Trip 2 Departure</b>			<b>Trip 2 Return</b>			<b>Purpose and Destination of Trip 2</b>			
	<b>Date</b>	<b>Time</b>	<b>Check One</b>	<b>Date</b>	<b>Time</b>	<b>Check One</b>				
			<input type="checkbox"/> AM <input type="checkbox"/> PM			<input type="checkbox"/> AM <input type="checkbox"/> PM				

DATE	TRIP #	DESCRIPTION OF EXPENSES and MODE of TRANSPORTATION	Personal Car Miles	Mileage Rate 0.67	LODGING	FARES	TOLLS	MEALS & INC EXP *	OTHER	TOTAL

<p>* Meals and Incidental Expenses (M&amp;IE) are limited to the Per Diem Rates for the location of travel published by the US General Services Administration (GSA). For the first and last day of travel, M&amp;IEs are limited to 75% of the Per Diem. For day travel, travelers are entitled to 75% of Per Diem if you are away from your official work station for more than 12 hours. If the trip includes meals paid by another source (e.g., Conference Registration Fee) then you will need to deduct those amounts from your voucher using the MI&amp;E Breakdown on the GSA Site.</p>	<b>TOTAL EXPENSES</b>
	LESS CASH ADVANCE or AMOUNT CHARGED TO RFMH CREDIT CARD <u>FROM PAGE 2</u>
	<b>NET BALANCE DUE TO:</b> <input type="checkbox"/> NYS* <input type="checkbox"/> RFMH <input type="checkbox"/> TRAVELER

\* For Payments to NYS, enter address for payment:

<b>TRAVELER'S SIGNATURE</b>	<b>SUPERVISOR'S SIGNATURE</b>	<b>PRINCIPAL INVESTIGATOR/DESIGNEE SIGNATURE</b>
<small>PRINT NAME</small>	<small>DATE</small>	<small>DATE</small>
<small>PRINT NAME</small>	<small>DATE</small>	<small>DATE</small>
<small>PRINT NAME</small>	<small>DATE</small>	<small>DATE</small>



Cash Advance Amount from RFMH [if applicable] \$ \_\_\_\_\_

Description	Date	Amount
<b>List Items Charged to RFMH Credit Card</b>		
<b>Total</b>		

Enter only charges paid by RFMH [RFMH issued Travel Card or Corporate Account]. Any charges on your personal credit card should be listed on page 1.