BANNER ID

Vincennes University
Same Day Travel Voucher

NOTICE:
SUBMIT ORIGINAL.
SIGN YOUR CERTIFICATE.

ALL REIMBURSEMENTS ARE DIRECT DEPOSIT ONLY. PLEASE KEEP YOUR ACCOUNT INFORMATION CURRENT.

Claimant Name _____ Date _____

Street Address _____ City _____ State _____ Zip _____

Department _____ Claimant Signature _____ Date _____

Purpose of Travel _____

SAME DAY TRAVEL** ☐ VU Vehicle ☐ Personal Vehicle ☐ Rental Vehicle

Mo/Day	Travel Between Points		Hours of		Subsistence **		Travel	
	From	To	Depart	Arrival		Other	# Miles	Mileage
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
TOTALS					$0.00	$0.00	0.00	$0.00

Department Approval _____ Date _____

Division Approval _____ Date _____

Total Subsistence	
Total Travel	
TOTAL CLAIMED	
Less Advance	
Total Due	

Vendor: Do not write in this space-Vincennes University Record

Audited and Approved for Payment by _____

Voucher Number _____

EXPENSE CLASSIFICATION			
FUND	ORG	ACCOUNT	AMOUNT
		TOTAL	$0.00

FORM APPROVED BY STATE BOARD OF ACCOUNTS FOR VINCENNES UNIVERSITY - 1981

**If travel begins before 10:00 AM and ends after 7:00 PM, the employee may claim per diem in the amount of $20.00. TOTALS Travel Between Points Hours of Subsistence ** Travel ORG ACCOUNT NOTICE: Subsistence Travel Per IRS regulations, per diem for travel without an overnight stay is taxable and is reimbursed through Payroll.