

## 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.*

<b>TO BE FILLED OUT BY DEPARTMENT</b>		<b>TRIP EVENT #</b> _____	
TRAVELER \$ _____	UC Travel Card \$ _____	TO UC \$ _____	
PI APPROVAL _____	DEPT. AUTHORIZATION _____		
<b>FUNDING SOURCE:</b> _____			
Source Name	Index	Fund	Account