

Traveler:		UFID	
Account / Project#			
Business Purpose			
Name of Meeting			

Benefit to UF, Be Specific			
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Check One	In State:		Out of State:		Foreign:	
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	Depart Time:	FROM City/State:	TO City/State:
Return Date:	Return Time:	FROM City/State:	TO City/State:

Travel to Multiple Locations			
Departure Date:	Depart Time:	FROM City/State:	TO City/State:
Return Date:	Return Time:	FROM City/State:	TO City/State:

Travel to Multiple Locations			
Departure Date:	Depart Time:	FROM City/State:	TO City/State:
Return Date: 4/2/23	Return Time:	FROM City/State:	TO City/State:

Please note that all amounts are estimates unless reservations have been made. Include all anticipated expenses

Type of Expense	PCARD		PERSONAL (Only amounts that will Encumber)
Airfare			
Taxi/Uber			
Fuel			
Lodging			
Registration			
Meals: Breakfast \$6	-		
Meals: Lunch \$11	-		
Meals: Dinner \$19	-		
RENTAL CAR			
Mileage #miles:			
<b>SUBTOTAL</b>			<b>\$0.00</b>
<b>GRAND TOTAL</b>		<b>\$0.00</b>	

Pursuant of Section 112.061(3)(a), Florida Statues, I hereby certify that this travel is for official business of the State of Florida and will be performed for the purpose(s) stated.	Travelers Signature:	
	Date:	
	PI Signature:	
	Date:	

- Important Notes**
1. Include **All** forms, quotes and background info of travel
  2. **All** conferences and convention must have attached; a registration form and receipt with Agenda (if available).
  3. Each meals included in the registration fee will **not** be included in daily meal rate reimbursment
  4. **All** travel expense receipts must be provided, itemized and have your **signature** on them.
  5. **All** travel pcard transactions are still bound by the pcard rules and must be submitted with **3 days**