

**TEXAS A&M RESEARCH FOUNDATION
EXPENSE ACCOUNT**

NAME OF CLAIMANT: _____ TO BE CHARGED TO ACCOUNT: _____

TAMUS UNIVERSAL ID NUMBER (UIN): _____ NON TAMUS SSN: _____

DEPARTMENT ADDRESS: _____

HOME ADDRESS: _____ STREET APT# CITY STATE/ZIP CODE EMAIL ADDRESS: _____

DATES OF TRAVEL: FROM (HOUR) _____ (DATE) _____ TO (HOUR) _____ (DATE) _____

TRIP TO: CITY _____ STATE: _____

PURPOSE: _____

ACCOMPANIED BY: _____

TRANSPORTATION	Check if Direct billed to RF	COMMUNICATIONS (Telephone)	\$ _____
AIRPLANE** (Passenger coupon must be attached)	\$	Receipts and documentation (person called and number) required when over \$75 and must be business related	
PERSONAL AUTO: _____ MILES AT _____ / MILE	\$		
RENTAL VEHICLE**	\$	MISCELLANEOUS EXPENSES***	
TAXICAB, LIMO, BUS*** (Document to/from, date)	\$		
TRAIN**	\$		
OTHER TRANSPORTATION	\$		

TOTAL TRANSPORTATION \$

PER DIEM (Lodging plus Meals and Expenses)

Days at \$ _____ per day \$ _____
 Days at \$ _____ per day \$ _____
 Days at \$ _____ per day \$ _____
TOTAL PER DIEM \$

SUBSISTENCE

LODGING**
 Days at \$ _____ per day \$ _____
 Days at \$ _____ per day \$ _____
 Days at \$ _____ per day \$ _____
TOTAL LODGING \$

TOTAL MISCELLANEOUS \$
TOTAL EXPENSE ACCOUNT \$
LESS RF ADVANCE \$
TOTAL DUE CLAIMANT \$
 or
TOTAL DUE RESEARCH FOUNDATION \$

MEALS

Number meals
TOTAL MEALS \$

Check No. Amount \$
 Comments:

*IRS regulations state that meals claimed for non-overnight trips and meals claimed above daily allowance, without receipts must be reported as taxable income.

**Receipt required

***Receipt required when \$75 or over

I certify that the travel related expenses have been incurred in the conduct of research or other sponsored activities and in accordance with the sponsor's provisions and guidelines and are properly chargeable to the account listed above.

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 Traveler Signature U.S. Citizen or Resident Alien
 Non U.S. Resident

 Principal Investigator Signature

 Date Phone Number

 Date Phone Number

INTERNAL USE ONLY

Texas A&M Research Foundation

 Date

 Reviewed by Travel

 Date

RF Travel Policy
 Other

G/L Account	Class	Amount

 TAMRF Source Number