

SFRC Travel Expense Request (TER)

Updated:
8/12/2018

If you are a new UF traveler, please provide your mailing address beside "Traveler".

Traveler Name: _____

UFID: _____

Mailing Address: _____

Phone #: _____

*Track your Expense Report through myUFL – My Self Service → Travel and Expenses → Expense Reports → View - enter your UFID and search

E-Mail Address: _____ (please provide a current/monitored email address)

Purpose of Travel: _____

Benefit to State: _____

Benefit to CRIS Project (required for Fund 221): _____

Travel Start End Dates: _____ to _____ Travel Start/End Times: _____ to _____ ***24 hour clock**

State Vehicle (if applicable): _____ State Vessel (if applicable): _____

ACCOUNTS TO CHARGE:

Account Holder Name (PI): _____

Dept. ID	Fund	Program	Source	Project #	Budget Ref	Flex Code	UFID	CRIS #	Amount

EXPENSES: **See pg 2 for additional lines and important information regarding Lodging**

Expense Type (See pg 2 for common)	Location	Dates	Amount	Description	PCard or Personal Funds?

- Breakfast - \$6.00 max: When travel begins before 6:00 A.M. and extends beyond 8:00 A.M.**
- Lunch - \$11.00 max: When travel begins before noon and extends beyond 2 P.M.**
- Dinner - \$19.00 max: When travel begins before 6:00 P.M. and extends beyond 8:00 P.M.**

Signature of this document certifies the expenses listed were 1) actually incurred as necessary traveling expenses in performance of official duties; 2) attendance at a conference/convention was directly related to official duties; 3) any meals or lodging included in registration fees have been deducted; 4) this claim is true and correct and conforms in every respect with the requirements of section 112.061, Florida Statutes; and 5) reimbursement has not been sought from a third party. For the intents and purposes of this document, an electronic signature will consist of your name, the date that this expense report is being submitted, and an E-mail address through which you can be contacted. Should insufficient or no information be provided, the processing of your request may be delayed.

Traveler Signature: _____

Date: _____

Funding Signature: _____

