AFTER Trip Form

Name: ______________________________________________  Account # __________________

Circle Trip Type: In-State  Domestic (US)  Foreign
Circle Trip Structure: Round Trip  Multi-Trip  One-Way
Circle Method of Travel:

Air  Circle Method to Airport:  Personal Car  Mileage__________
   IU Car  Limo  Shuttle  Passenger

Personal Car  Mileage__________
Motor Pool Rental
Enterprise Campus Rental
Other Rental
Other Method:  Bus  Courtesy Car  Limo  Passenger  Train  N/A

Trip Destination & Dates and Time

Destination: ___________________________________________________________________________
Date and Time Departure: ______________________________ am or pm (from Bloomington)
Date and Time Arrival: _________________________________ am or pm (back in Bloomington)

If Multi-Trip Destinations

Destination A: ________________________________ Method of Travel: _________________
Date/Time Departure: ______________________________ am or pm (from Bloomington, IN)
Date/Time Arrival: ________________________________ am or pm
Date/Time Departure: ______________________________ am or pm

Destination B: ________________________________ Method of Travel: _________________
Date/Time Arrival: ________________________________ am or pm
Date/Time Departure: ______________________________ am or pm
Destination C: ________________________________ Method of Travel: _________________
Date/Time Arrival: ________________________________ am or pm
Date/Time Departure: ______________________________ am or pm
Date/Time Arrival: ________________________________ am or pm (back in Bloomington, IN)

Purpose / Conference Name: ___________________________________________________________________________

Meals & Personal Time

Are you claiming Per Diem?  Yes  No  Were meals provided?  Yes  No
Which dates & meals provided: ___________________________________________________________________________
Was Personal Time involved?  Yes  No
Which dates for personal time? ___________________________________________________________________________
## Reimbursements – make sure ALL receipts are provided and are original

<table>
<thead>
<tr>
<th># of Receipts</th>
<th>Amount of each receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Air</td>
<td>_______________________</td>
</tr>
<tr>
<td>Lodging</td>
<td>_______________________</td>
</tr>
<tr>
<td>Rental Car</td>
<td>_______________________</td>
</tr>
<tr>
<td>Registration</td>
<td>_______________________</td>
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<tr>
<td>Parking</td>
<td>_______________________</td>
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<tr>
<td>Phone</td>
<td>_______________________</td>
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<tr>
<td>Taxi</td>
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<tr>
<td>Tolls</td>
<td>_______________________</td>
</tr>
<tr>
<td>Fuel</td>
<td>_______________________</td>
</tr>
<tr>
<td>Luggage</td>
<td>_______________________</td>
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<tr>
<td>Other</td>
<td>_______________________</td>
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<tr>
<td>Other</td>
<td>_______________________</td>
</tr>
<tr>
<td>Other</td>
<td>_______________________</td>
</tr>
</tbody>
</table>

### Additional Information: - Sometimes an “Exception To Policy” form needs to be filled out and signed

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

### If something was prepaid by IU, please provide original receipt

*Remember to check “Notifications” in OneStart.

You have **60 days** to provide me with receipts after you take the trip.

### IU Travel Policy Statement

Travelers will **have 60 days** from the return date of their trip in which to submit travel reimbursement claims. Reimbursements submitted after this 60 day period will require written justification with travel receipts. After **120 days** from the return date of the trip, there will be no reimbursement.