



**Campus Recreation  
SPORT CLUBS**

**Post Travel Expense Report**

Form must be completed for each traveler receiving reimbursement  
and turned in within **2 days** after return

Sports Officials Association	Cameron Swoboda	
Sport Club	Name of Traveler	
NIRSA Midwest FFB Regional	Iowa City, IA	11/12/10 - 11/14/10
Event	Event Location	Date(s) of Event

**Actual Costs for SCP Reimbursement Amounts**

\*\*Include only costs the club is getting reimbursed for\*\*

RECEIPTS FOR REIMBURSEMENT EXPENSES NEED TO BE TURNED IN WITH THIS FORM

Type of Cost	Actual Cost
Hotel/Lodging	\$225.00
Map Mileage (one private vehicle only) - Mileage reimbursed at \$0.445/mile List maximum number of round trip miles for this trip: <u>2118</u> List number of miles requested for reimbursement: <u>500</u> <i>Note - Miles reimbursed cannot exceed total round trip miles, but can be any # below total</i>	\$222.50
Vehicle Rental (one rental vehicle only)	
Gas (for one rental vehicle above only)	
Airline Charges (Requires Approval)	
Entry/Registration Fee(s)	
<b>Total Costs</b>	<b>\$447.50</b>

Additional Comments/Explanation of Expenses

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**X**

Officer Signature  
Cameron Swoboda

Form Completed By

Date

11/15/2010

Date

**X**

Officer Signature

Date

For Office Use Only

Received By: \_\_\_\_\_