

THE UNIVERSITY OF THE WEST INDIES

ACCOUNTING FOR SUBSISTENCE ADVANCED

NAME OF OFFICER:

DEPARTMENT:

TERRITORY VISITED:

DEPARTURE DATE:

DATE OF RETURN:

PURPOSE OF TRIP:

SUBSISTENCE: (A) NIGHTS @
 (B) NIGHTS @
 (C) NIGHTS @

TOTAL

OTHER EXPENSES DETAILED AS FOLLOWS:

(To be supported by vouchers)

Round Trip To/From Hotel to airport \$
 Airport to Hotel - \$
 Hotel to Airport - \$
 TOTAL \$ EXPENSES \$

Extra Bag – To Destination \$
 Extra Bag – From Destination \$
 Transportation to / from Airport Local @ \$ each way \$
 TOTAL \$ EXPENSES \$

TOTAL AMOUNT SPENT
 LEASS AMOUNT ADVANCED AS PER CHEQUE

Cheque # DATED \$
 AMOUNT TO BE REFUNDED / AMOUNT DUE \$

SIGNATURE

DATE of SUBMISSION

DETAILS VERIFIED BY

APPROVED BY
 (Head of Department)

CANCELLATION OF TRIP
 (To be completed only if trip was not taken)

I DID NOT UNDERTAKE THE VISIT AS RECOMMENDED BY THE HEAD OF MY DEPARTMENT.

.....
 Signature of Member of Staff

Return of Subsistence:

Receipt #: _____ Date: _____ Amount: _____

***This form is to be submitted with boarding passes within seven (7) of return to domicile.**