University of West Florida Recreation

Sport Club Travel Follow-Up Form

Sport Club:	rt Club:			Date Rece (Office Use)	ived:		
Please submit th		etitive Sports Office st be included in add		e Wednesday a		urn. All neces	sary itemized
		Trip Inform	nationPlease	complete ev	ery a <u>rea</u>		
Main Contact:				Phone Num	ber:		
Address:							
Nautilus Card #:			Check box if t	he member h	as received i	reimburseme	nts before
Trip Highlights (placing, awards, out- come, etc.)				What abou the trip could of gone bette	r?		
Destination:			Departure Date:		Departure Time:	2	
Mileage from Pensacola to Destination:			Return Date:		Return Time:		
O Personal Veh	oortation- Choose nicle(s)	1		_	unt for thos unds were	spent	SGA-allocated Included
		Tag #:]	
Starting Mileag	e: End	ling Mileage:	Lodg	ing Total:		Receipt	Included
Driver:		Tag #:	# of	f Rooms:			
Starting Mileag	e: Ending Mileage:		# of	# of Nights:			
Driver:	Tag #:		Reg	Registration:		Receipt Included	
Starting Mileag	starting Mileage: Ending Mileage:			Gas:		Receipt Included (w/ tag # identified on each)	
O Rental Vehicle				Other:		Receipt	Included
Driver:		Tag #:	C	Other:		Receipt	Included
Starting Mileage: Ending Mileage:			То	Total Spent w/ SGA-Allocated Funds:			
Driver:	er: Tag #:		Тс	Total Reimbursement Neede			
Starting Mileage: Ending Mileage:				otal Cash Adva	nce Spent:	Ī	
O Other			*A	ıll itemized receip	ts must be atta	ached to this forr	n when submitted.
Description:							