HILLSBOROUGH
Community College

TEAM/STUDENT GROUP TRAVEL RECONCILIATION WORKSHEET

Attach (if applicable): agenda, registration and receipts

Event ____________________________________________

Date/Time: From ____________________________ Time ____________________________
To ____________________________ Time ____________________________

Location: City ____________________________ State ____________________________

Advisor’s Signature ____________________________________________
Administrator’s Signature ____________________________________________

SUMMARIZATION: (ATTACH ALL RECEIPTS)

Name of Hotel ____________________________________________

Table:

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<tr>
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<th>Single @ $</th>
<th>Double @ $</th>
<th>Triple @ $</th>
<th>Quad @ $</th>
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Meals = $__________ Meals (paid by Advisor/Coach) = $__________
Registration: = $__________
Gas (for College/Rented vehicle) = $__________
Van Rental @ $ = $__________
Car Rental @ $ = $__________
Mileage: ____ miles @ $.44.5/mile = $__________
Mileage: ____ auto(s) ____ miles Per auto @ $.44.5/mile = $__________
Other: = $__________
Explain: = $__________

Total: = $__________

Amount Advance Request # ______ $__________
Total Expenditures: = $__________
Amount Due HCC: = $__________
Amount due employee received from sources other than HCC: = $__________

Total Amount Due Employee: = $__________

Approved: ____________________________ Date: ____________________________

6-1-023 (8/06)