

# *South Florida Veterans Affairs Foundation*

## *For Research and Education, Inc.*

1201 N.W. 16 Street, Miami, FL 33125  
 phone: (305) 575-3179 fax: (305) 575-3126

### TRAVEL VOUCHER

<b>Name &amp; Mailing Address:</b>	<b>Period of Travel</b>	<b>Points of Travel</b>
	<u>From</u> <u>To</u>	<u>From</u> <u>To</u>
<b>Office Phone No.:</b>	<b>Ticket No.:</b>	<b>Ticket Price:</b>
<b>Social Security No.:</b>	<b>Airline Carrier:</b>	<b>Mode of Travel:</b>

### TRAVEL TO

<u>DATE</u> 20__	<u>TIME</u> AM/PM	<u>DESCRIPTION</u>	<u>MEALS</u>	<u>HOTEL</u>	<u>SUB-TOTAL</u>	<u>MILES</u>	<u>TOTAL</u>	<u>OTHER</u>
Subtotal								

Date: \_\_\_\_\_

Traveler Signature: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Amount Claimed	\$
Amount Advanced	\$
<b>Amount Due Traveler</b>	<b>\$</b>