MASSACHUSETTS INSTITUTE OF TECHNOLOGY
CONTROLLER'S ACCOUNTING OFFICE
TRAVEL EXPENSE VOUCHER

C/O _____ $ _____
C/O _____ $ _____
C/O _____ $ _____
C/O _____ $ _____

ACCTG. VOUCHER NO. _____

NAME Tony Hyun Kim **EMPLOYEE** No **STUDENT** Yes
ADDRESS 70 Pacific Street #614, Cambridge, MA 02139
DATE TRIP STARTED 18.02.2010 **TIME** 08:00 am **DATE TRIP ENDED** 21.02.2010 **TIME** 10:30 pm
PURPOSE OF TRIP SQuInT conference

TRANSPORTATION

DATE	FROM	TO	MODE	AMOUNT
18.02.2010	Boston	Albuquerque	flight	$ 443,30
21.02.2010	Albuquerque	Boston	flight	

PRIVATELY OWNED AUTOMOBILE none MILES @ 0,48 PER MILE
TOLL CHARGES

TAXI, BUS, ETC

DATE	FROM	TO	MODE

SUBSISTENCE

HOTEL NUMBER OF NIGHTS
NUMBER OF MEALS
PER DIEM ALLOWANCE FOR FOREIGN TRAVEL ONLY OR PRE APPROVED DOMESTIC TRAVEL:
(IN LIEU OF HOTEL AND MEAL CHARGES) DAYS @ PER DAY

OTHER EXPENSES (ITEMIZE)

PLEASE ATTACH TICKET STUBS AND HOTEL BILLS

TRAVELER'S EXPENSE	$ 443,30	$ 443,30
LESS ADVANCES: (Cash, Registrations, Deposits, Furn.Tickets)	$ 0,00	
NET DUE: M.I.T.	$	
NET DUE: TRAVELER	$ 443,30	

SIGNATURE OF TRAVELER DATE

NET DUE: 3rd party (hotel etc)

AUTHORIZED SIGNER ON THE ROLES DATA BASE SYSTEM DATE

PRINT NAME OF AUTHORIZED SIGNER DATE

TOTAL COST OF TRIP $ 443,30

rev 1/06 *Mail Original to the Travel Office at NE49-4037*