NM STATE UNIVERSITY

College of Agricultural, Consumer and Environmental Sciences
Department of Entomology, Plant Pathology and Weed Science
MSC 3BE, New Mexico State University
P.O. Box 30003, Las Cruces, NM 88003-8003

PRE-TRIP

Today's Date:

Banner ID:

Payee:

Traveler (s):

Destination (s):

Business purpose and benefit of travel: ***If applicable, please attach Meeting/Conference Announcement or Agenda***

Date (s):

(NMSU) Departure Time: **(NMSU) Return Time:**

Index Number (s): **Fund Number (s):**

Transportation Method:

If claiming mileage, please provide directions via Google Maps

Check One: **Per Diem** ☐ **or** **Actuals** ☐ Meals, Lodging, Transportation, Registration/Conference Fees, Parking, and Other

Department Approval:

Signature: **Date:**

Department Head / Principle Investigator

POST-TRIP

As applicable, please provide receipts for travel expenses requested for actuals reimbursements.

Revised 07/03/2026