SUNY RF
The Research Foundation for
The State University of New York

STATEMENT OF AUTOMOBILE TRAVEL
(Submit with travel expense voucher)

PAYEE _____

Date	Between What Points		Business Purpose	Hour of Departure		Hour of Arrival		Miles Traveled
	From	To		A.M.	P.M.	A.M	P.M.	
							Total Miles	0.00

I hereby certify that **the travel indicated was necessary and on official business of the** Research **Foundation.**

Signature of Traveler

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