



**NC State College of Veterinary Medicine  
Graduate Student Association  
Travel Fund Voucher**

**NOTE:** ORIGINAL receipts must accompany this form. Charge card receipts are NOT acceptable except in the case of gasoline. Do **NOT** submit receipts for **food** as expenditures because you **cannot** be reimbursed for these expenses.

Applicant Name: \_\_\_\_\_

Student ID# : \_\_\_\_\_

Email: \_\_\_\_\_

Home address: \_\_\_\_\_

Phone: \_\_\_\_\_ (school) \_\_\_\_\_ (home)

Attach receipts for the following costs:

A. Transportation Costs \_\_\_\_\_

B. Lodging \_\_\_\_\_

C. Registration Fee \_\_\_\_\_

Student's Pledge

I have read, understand, and agreed to abide by the regulations governing the allocation and use of CVM GSA Travel funds.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (print) \_\_\_\_\_

Return completed form accompanied by the original receipts:

Nicholas Manzo, CVM GSA President  
NC State College of Veterinary Medicine Mailroom  
4700 Hillsborough Street  
Raleigh, NC 27606