

17608

Name of Traveler _____		Department _____		Today's Date _____		Destination _____	
Departure Date _____		Return Date _____		Purpose of Travel _____		Fund & Dept _____ Project or Grant _____	
EXPENSE INFORMATION							
Fill in actual expenses after travel		Per Diem Percentages: Breakfast = 25% Lunch = 25% Dinner = 50%					
<u>Estimated Expenses</u>		<u>Actual Per Diem</u>				<u>Actual Expenses</u>	
Transportation (Mode _____)	\$ _____	Date	Breakfast	Lunch	Dinner	Total	Retain receipts for actual cost Total
Lodging	_____	_____	_____	_____	_____	\$ _____	Lodging \$ _____
Per Diem _____ @ _____	_____	_____	_____	_____	_____	_____	Transportation _____
Parking, Taxi, Tips, etc	_____	_____	_____	_____	_____	_____	Registration _____
Account #42613 Sub Total	\$ _____	_____	_____	_____	_____	_____	_____
Registration Account #42614	_____	_____	_____	_____	_____	_____	_____
Other: _____	_____	_____	_____	_____	_____	_____	_____
Account #	_____	_____	_____	_____	_____	_____	_____
1. TOTAL TRAVEL COST	\$ _____	P = Meal Provided				2. Total	3. Total \$ _____
VENDOR PAYMENT INFORMATION		VCHR # For A/P		<u>Miscellaneous Expenses</u>			
Vendor must be set up before submitting application				Receipts required for reimbursement			
<u>Vendor Name & Address</u>	Amount of Check	Date		Description		Total	
_____	_____	_____		_____		\$ _____	
_____	\$ _____	_____		_____		_____	
_____	_____	_____		_____		_____	
_____	\$ _____	_____		_____		_____	
_____	_____	_____		_____		_____	
_____	\$ _____	_____		_____		_____	
_____	_____	_____		_____		_____	
_____	\$ _____	_____		_____		_____	
Balance Advanced to Traveler	\$ _____	_____		_____		_____	
						4. Total \$ _____	
						Totals	
						Add total of columns 2, 3 and 4	
						Less Estimated Expenses (column 1)	
						Amount Due Traveler _____ City _____	
						\$ _____	
AUTHORIZATIONS							
I understand that a travel advance is made to cover expenses incurred while on official City Business				I hereby certify that all expenses listed are accurate and were incurred while on City business.			
_____(Traveler)				_____(Traveler)			
I hereby authorize an advance to the above named traveler in the amount shown.				I hereby authorize payment of amounts which exceed costs as estimated.			
_____(Director)				_____(Director)			
_____				_____			
City Administration as required				City Administration as required			