

INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
TRAVEL EXPENSE CLAIM

Name of Claimant: Comfort ADETONA - 93646 **Travel Authorisation No:** SS10/JUB/0733/JUL/20

| | | | | | | For Accounting Use only | | | |
|------------------------------|-------------|------------------|-------------------------|-------------------|----------------------|--|-----------------|-----------------------|---------------|
| SECTION 1 - Itinerary | | | | | | Daily Subsistence Allowance (DSA) | | | |
| | | Date (dd-mmm) | Local Time (24hr) | Mode of Travel | No. kms (for car) | % | No Of Nights | DSA Rate in USD | Amount USD |
| Dep. | Accra | 04-Aug-20 | #Error | Air | | | | | |
| Arr. | Addis Ababa | 04-Aug-20 | #Error | Air | | 100.00 | 1 | 750.00 | 750.00 |
| Dep. | Addis Ababa | 05-Aug-20 | #Error | Air | | | | | |
| Arr. | Juba | 05-Aug-20 | #Error | Air | | 100.00 | 1 | 900.00 | 900.00 |
| TOTAL SECTION 1 | | | | | | 2.00 | | \$ 1,650.00 | |

Remarks

| SECTION 2 - Expenses | | | | | | | | |
|--|---------------------------|-----------------------|-------|--------|--|--|-------------|---------------|
| | Details of Expenditure | Date Paid (dd-mmm) | Curr. | Amount | | | Rate USD | Amount USD |
| TOTAL SECTION 2 (Note: Please provide receipts for all expenses claimed.) | | | | | | | | \$ |

Remarks

| SECTION 3 - Travel Advances | | | | | | | | |
|------------------------------------|----------------------------------|-----------------------|-------|--------|--|--|-------------|---------------|
| | Paying Office (Location Code) | Date Paid (dd-mmm) | Curr. | Amount | | | Rate USD | Amount USD |
| TOTAL SECTION 3 | | | | | | | | \$ |

I request payment of travel allowances due and/or reimbursement of expenses in accordance with the general instructions on travel.

Remarks:



John mading mabior ACINYUC

SIGNATURE OF CLAIMANT

APPENDIX B

*TRAVEL EXPENSE CLAIM
SUMMARY OF TOTALS*

Name of Claimant:

Comfort ADETONA -
93646

TA No:

SS10/JUB/0733/JUL/20

Date submitted to Accounting:

04-03-2021

| YES | NA | Travel claim documents to be submitted with the Travel Expense Claim (TEC) | Notes/Comments |
|-----|----|---|----------------|
| | ✓ | Accommodation and/or meals officially provided by organizers have been specified on the original TA and Remarks section of the TEC | |
| | ✓ | All materials used during travel have been returned to the office (e.g. phones, laptops, keys, badges, etc.) | |
| | ✓ | Annual leave in connection with official travel or a private stay at some point en route has been specified on the original TA and Remarks section of the TEC | |
| | ✓ | For trainings, conferences or workshop - programme or schedule of activities provided by the Organizers | |
| | ✓ | High rate hotel - approval documentation from the Executive Officer and original hotel | |
| | ✓ | Original bills and receipts from hotel or other paid accommodation | |
| | ✓ | Original receipts for all expenses claimed on Section 2 of the TEC | |
| ✓ | | Original ticket receipts & boarding passes for all legs of the journey | |
| ✓ | | Original Travel Authorization (TA) | |

For Accounting Use Only

| | USD | GL |
|----------------------|----------|----|
| Total Section 1 | 1,650.00 | |
| Total Section 2 | | |
| Sub Total | 1,650.00 | |
| Less Total Section 3 | () | |
| DueTo (From) Staff | 1,650.00 | |

Prepared by:

Reviewed by:

Approved By:

Finance

RMO

SRMO