

**INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)**  
**TRAVEL EXPENSE CLAIM**

**Name of Claimant:** Steller makasi KAVUWA - 76450 **Travel Authorisation No:** SS10/JUB/0668/JUL/20

**For Accounting Use only**

| SECTION 1 - Itinerary |         | Date<br>(dd-mmm) | Local<br>Time<br>(24hr) | Mode of<br>Travel | No. kms<br>(for car) | Daily Subsistence Allowance (DSA) |                 |                       |               |
|-----------------------|---------|------------------|-------------------------|-------------------|----------------------|-----------------------------------|-----------------|-----------------------|---------------|
|                       |         |                  |                         |                   |                      | %                                 | No Of<br>Nights | DSA<br>Rate<br>in USD | Amount<br>USD |
| <b>Dep.</b>           | Juba    | 12-Jul-20        | #Error                  | Air               |                      |                                   |                 |                       |               |
| <b>Arr.</b>           | Nairobi | 12-Jul-20        | #Error                  | Air               |                      |                                   |                 |                       |               |
| <b>Dep.</b>           | Nairobi | 31-Aug-20        | #Error                  | Air               |                      |                                   |                 |                       |               |
| <b>Arr.</b>           | Juba    | 31-Aug-20        | #Error                  | Air               |                      |                                   |                 |                       |               |

**TOTAL SECTION 1** \$

Remarks

| SECTION 2 - Expenses                |                    |       |        |  |  |          |            |
|-------------------------------------|--------------------|-------|--------|--|--|----------|------------|
| Details of Expenditure              | Date Paid (dd-mmm) | Curr. | Amount |  |  | Rate USD | Amount USD |
| Trademark Hotel Bill for quarantine | 12-Aug-20          | USD   | 600.00 |  |  | 0.000    | 0.00       |

**TOTAL SECTION 2** (Note: Please provide receipts for all expenses claimed.) \$ 0.00

Remarks

| SECTION 3 - Travel Advances   |      |                    |       |          |  |  |          |            |
|-------------------------------|------|--------------------|-------|----------|--|--|----------|------------|
| Paying Office (Location Code) |      | Date Paid (dd-mmm) | Curr. | Amount   |  |  | Rate USD | Amount USD |
|                               | SS10 | 10-Jul-20          | USD   | 1,200.00 |  |  | 0.000    | 0.00       |

**TOTAL SECTION 3** \$ 0.00

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

**Remarks:**



**SIGNATURE OF CLAIMANT**

## APPENDIX B

# TRAVEL EXPENSE CLAIM SUMMARY OF TOTALS

Name of Claimant:

Steller makasi KAVUWA  
- 76450

TA No:

SS10/JUB/0668/JUL/20

Date submitted to Accounting:

02-12-2020

| 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      |        |    |
| Total Section 2      | 0.00   |    |
| Sub Total            | 0.00   |    |
| Less Total Section 3 | (0.00) |    |
| DueTo (From) Staff   | 0.00   |    |

Prepared by:

Reviewed by:

Approved By:

Finance

RMO

SRMO