

TRAVEL VOUCHER

PERSON TRAVELING _____

DATE	DEPARTURE/TIME (LOCATION)	ARRIVAL/TIME (LOCATION)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

REIMBURSABLE EXPENSES: (HOTEL, AIRFARE, TAXI, LIMOUSINE, CAR RENTAL, ETC.-
 ENTER AMOUNT BELOW **ONLY** IF IT IS TO BE REIMBURSED TO PERSON TRAVELING
DO NOT INCLUDE AMOUNTS PAID TO OTHER VENDORS FOR ABOVE MENTIONED SERVICES.)

ITEM	AMOUNT
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
PERSONAL VEHICLE USAGE MILES @ .58 CENTS	\$ _____
	\$ _____
	\$ _____
<u>TOTAL REIMBURSABLE EXPENSES</u>	<u>\$ _____</u>
_____ DAYS PER DIEM AT \$50/DAY (BASED ON 24 HR PERIODS)	\$ _____
	\$ _____
<u>TOTAL EXPENSES</u>	<u>\$ _____</u>
LESS ADVANCE CHECK # _____	_____
<u>NET AMOUNT DUE</u>	<u>\$ _____</u>

PURPOSE OF TRIP AND PROJECTS OR ACCOUNTS TO BE CHARGED:

 EMPLOYEE'S SIGNATURE

 CITY MANAGER'S SIGNATURE

 DEPARTMENT HEAD

 FINANCE

COMPLETE TRIP REPORT ON REVERSE SIDE

TRIP REPORT

PERSON TRAVELING _____

SUMMARY OF **ALL** EXPENSES PAID BY THE CITY FOR THIS TRIP:

HOTEL CHARGES	\$ _____
AIRFARE	_____
TAXI FARE	_____
RENTAL CAR	_____
MILEAGE REIMBURSEMENT	_____
PER DIEM	_____
REGISTRATION/TUITION	_____
ENTERTAINMENT	_____
BAGGAGE FEE	_____
OTHER _____	_____
TOTAL	\$ _____

PURPOSE OF TRIP (GIVE FULL EXPLANATION); EXPLAIN HOW THIS TRIP BENEFITED THE CITY:

EMPLOYEE SIGNATURE _____

DATE _____