

# TRAVEL EXPENSE CLAIM

Official's Name

Residence

Event Title

Event Dates

CITY		STATE	ZIP CODE			Event Location:						STATE	ZIP CODE	
(1) MONTH/YR	(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENTALS	(7) TRANSPORTATION				(8) BUSINESS EXPENSE	(9) TOTAL EXPENSES FOR DAY		
(2) DATE			TIME	BREAK-FAST	LUNCH		DINNER	(A) COST OF TRANS.	(B) TYPE USED	(D) TOLLS, CARFARE, PARKING			PRIVATE CAR USE	

														\$	0.00
														0.00	0.00
														0.00	0.00
														0.00	0.00
														0.00	0.00
														0.00	0.00
														0.00	0.00
														0.00	0.00
														0.00	0.00
														0.00	0.00

(10)	<b>SUBTOTALS</b>		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
COLUMN CODE (ACCTG. USE ONLY)															

<b>CLAIM TOTAL</b>													\$	0.00
--------------------	--	--	--	--	--	--	--	--	--	--	--	--	----	------

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)

(13) PRIVATE VEHICLE LICENSE NO.

In order to use the automatic feature you must enter a number in the lower half of the adjacent box that is the allowable mileage rate (changes each year) in decimals. e.g. 45 cents per mile is entered as .45

(14) MILEAGE RATE CLAIMED

--