

# TRAVEL REIMBURSEMENT REQUEST AND EXPENSE REPORT

|  |      |      |                      |      |        |                    |      |        |
|--|------|------|----------------------|------|--------|--------------------|------|--------|
| Date of This Report                                |      |      | Budget Account No.   |      |        |                    |      |        |
| Employee Name                                      |      |      | Title                |      |        | Department         |      |        |
| Destination  |      |      | Travel Date(s)       |      |        |                    |      |        |
|  |      |      | From: Month Day Year |      |        | To: Month Day Year |      |        |
|  | Sun. | Mon. | Tues.                | Wed. | Thurs. | Fri.               | Sat. | Totals |
| Dates Traveled                                     | /    | /    | /                    | /    | /      | /                  | /    |        |
| Fares, Air, Bus, etc.<br>To / From Destination     |      |      |                      |      |        |                    |      |        |
| Lodgings   |      |      |                      |      |        |                    |      |        |
| Meals ( Actual Cost )                              |      |      |                      |      |        |                    |      |        |
| Breakfast  |      |      |                      |      |        |                    |      |        |
| Lunch  |      |      |                      |      |        |                    |      |        |
| Dinner   |      |      |                      |      |        |                    |      |        |
| Optional Per Diem                                  |      |      |                      |      |        |                    |      |        |
| Trans. at Destination<br>( Taxi, Bus, Rental Car ) |      |      |                      |      |        |                    |      |        |
| Registration Fees                                  |      |      |                      |      |        |                    |      |        |
| Conference Expenses                                |      |      |                      |      |        |                    |      |        |
| Telephone / Telegraph                              |      |      |                      |      |        |                    |      |        |
| Mileage - Personal Auto<br>(AT APPROVED RATE )     | MI.  | MI.  | MI.                  | MI.  | MI.    | MI.                | MI.  | MI.    |
| Other Expenses                                     |      |      |                      |      |        |                    |      |        |
| Totals   |      |      |                      |      |        |                    |      |        |

Explanation of travel expenses for personal auto ( at approved rate ) :
 

| Date | From ( location ) | To ( location ) | Odometer<br>Begin | Reading<br>End | Mileage<br>Claimed | Amount |
|------|-------------------|-----------------|-------------------|----------------|--------------------|--------|
|      |                   |                 |                   |                |                    |        |
|      |                   |                 |                   |                |                    |        |
|      |                   |                 |                   |                |                    |        |
|      |                   |                 |                   |                |                    |        |
|      |                   |                 |                   |                |                    |        |
|      |                   |                 |                   |                |                    |        |
|      |                   |                 |                   |                |                    |        |

|   |    |  |
|---|----|--|
| Total Expense of Trip                     | \$ |  |
| Less Expenses Prepaid by Town             | \$ |  |
| Balance                                   | \$ |  |
| Less Cash Advanced                        | \$ |  |
| Balance Due Town or Employee (Circle One) | \$ |  |

Comments : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that the foregoing travel expenses were incurred in the conduct of Town business.

I have examined this reimbursement request and certify that it is just and reasonable.

Signed : \_\_\_\_\_

Signature of Traveler                      Date

Approved : \_\_\_\_\_

Department Head                                      Date

Approved : \_\_\_\_\_

Town Manager    Date