

Duplicate within 40 days after receiving travel advance, otherwise the advance shall be subject to payroll deduction.

## Travel Expense Form

\_\_\_\_\_  
Name of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department

\_\_\_\_\_  
Title

Travel To: \_\_\_\_\_ Period: \_\_\_\_\_ to \_\_\_\_\_  
City, State Date Date

Purpose: \_\_\_\_\_

(1) Expense (Note if expenses are supported by attached receipts)	Amount
Transportation:	\$
Lodging:	\$
Meals:	\$
Tips:	\$
Taxi Cabs:	\$
Other Expenses:	\$
(2) Total Expenses:	\$

I, \_\_\_\_\_, certify that this travel expense account is correct, that the travel was performed on the dates specified for official business only, and that the expenses were for official business.

\_\_\_\_\_  
Submitting Employee's Signature

APPROVED: \_\_\_\_\_  
Agency Director

APPROVED: \_\_\_\_\_  
Appointing Authority Signature

APPROVED: \_\_\_\_\_  
Chief Administrative Officer

(3) AMOUNT ADVANCE ON VOUCHER NO. \_\_\_\_\_ DATED \_\_\_\_\_

(4) LESS: Total expenses reported in Line 2 above: \$ \_\_\_\_\_

(5) DIFFERENCE:

Excess of line 3 over 4 deposited as per copy of Receiving Warrant No. \_\_\_\_\_ attached.  
SHOULD LINE 4 EXCEED LINE 3 ABOVE, EXPLAIN IN THE SPACE PROVIDED BELOW:

\_\_\_\_\_  
Reimbursement requested for additional funds in connection with expenses in excess of Advance in the  
Amount \$ \_\_\_\_\_ requested on Public Voucher Number \_\_\_\_\_ Dated \_\_\_\_\_.