

County of Volusia - Actual Travel Expense Form

Out-of-County Day Trip **FY 04 Jan 04 forward**

A	TRAVELER INFORMATION		VENDOR NUMBER:																															
TRAVELERS NAME:		SOCIAL SECURITY NUMBER:	DEPARTMENT / DIVISION:																															
DESTINATION: (City, County, State)		DEPARTURE DATE AND TIME-	RETURN DATE AND TIME:																															
PURPOSE:																																		
B	TRIP/EVENT INFORMATION		<input type="checkbox"/> ENTERTAINMENT EXPENSES INCLUDED - form is attached																															
MEALS & INCIDENTALS ALLOWANCE: Correct meal rate must be entered.																																		
WILL BE TAXED		NO COUNTY CREDIT CARD CHARGES ALLOWED	Sent to personnel for processing Date: _____ By: _____																															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td align="center" colspan="7">CONUS meal & incidental allowance chart</td> </tr> <tr> <td>BREAKFAST</td> <td>_____</td> <td>\$ 6</td> <td>\$ 7</td> <td>\$ 8</td> <td>\$ 9</td> <td>\$ 9</td> <td>\$ 10</td> </tr> <tr> <td>LUNCH</td> <td>_____</td> <td>\$ 6</td> <td>\$ 7</td> <td>\$ 8</td> <td>\$ 9</td> <td>\$ 11</td> <td>\$ 12</td> </tr> <tr> <td>DINNER</td> <td>_____</td> <td>\$ 19</td> <td>\$ 21</td> <td>\$ 23</td> <td>\$ 25</td> <td>\$ 27</td> <td>\$ 29</td> </tr> </table>		CONUS meal & incidental allowance chart							BREAKFAST	_____	\$ 6	\$ 7	\$ 8	\$ 9	\$ 9	\$ 10	LUNCH	_____	\$ 6	\$ 7	\$ 8	\$ 9	\$ 11	\$ 12	DINNER	_____	\$ 19	\$ 21	\$ 23	\$ 25	\$ 27	\$ 29	_____ = _____	
CONUS meal & incidental allowance chart																																		
BREAKFAST	_____	\$ 6		\$ 7	\$ 8	\$ 9	\$ 9	\$ 10																										
LUNCH	_____	\$ 6	\$ 7	\$ 8	\$ 9	\$ 11	\$ 12																											
DINNER	_____	\$ 19	\$ 21	\$ 23	\$ 25	\$ 27	\$ 29																											
		_____ = _____																																
		_____ = _____																																
		MEAL TOTAL																																
MILEAGE - PERSONAL VEHICLE:																																		
DESTINATION _____ @ 0.375 \$ _____		Rates good starting in Jan 04	Comments:																															
VICINITY _____ @ 0.375 = \$ _____																																		
(Over 50 vicinity miles requires explanation)																																		
Enter miles as WHOLE numbers only!		MILEAGE TOTAL																																
REGISTRATION FEE:																																		
TRANSPORTATION: VEHICLE RENTAL																																		
GAS, OIL, ETC. (RENTAL OR COUNTY VEHICLE)																																		
AIRLINE																																		
PARKING FEES / TOLLS / TAXI / PUBLIC TRANSPORTATION																																		
ENTERTAINMENT EXPENSES (FORM AND RECEIPTS ARE ATTACHED)																																		
OTHER- including Business Phone Calls (PROVIDE DESCRIPTION)																																		
TOTAL OF ALL EXPENSES																																		
LESS:	PREPAYMENTS:	_____	_____																															
	COUNTY CREDIT CARD CHARGES:	_____	_____																															
	TRAVEL AGENT BILLINGS	_____	_____																															
		TOTAL ALL EXPENSES PREPAID	Enter last four (4) digits of any VISA cards used in payment of these Travel Expenses																															
TOTAL AMOUNT DUE TRAVELER			Account Number -4000																															
CERTIFICATION AND AUTHORIZATION																																		
I hereby certify or affirm that this travel claim is true and correct in every material matter; that the expenses were actually incurred by the undersigned as necessary travel expenses in the performance of my official duties; and that same conforms in every respect with the requirements of the County of Volusia travel policy and procedures.																																		
TRAVELER'S SIGNATURE:			DATE:																															
DEPARTMENT /DIVISION DIRECTORS SIGNATURE:			DATE:																															
REVIEWED BY (ACCOUNTING)			DATE:																															