

# TOWN OF JONESVILLE TRAVEL APPROVAL REPORT

EMPLOYEE NAME: \_\_\_\_\_ DATE OF REPORT: \_\_\_\_\_

Purpose of Trip: \_\_\_\_\_

Destination: \_\_\_\_\_

<u>Itemized Expenses:</u>	Date: Day:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Totals
A. Gasoline Purchases (County Vehicle) ***									
B. Meals ( <b>\$37 Daily Maximum- No Receipts Required</b> )									
Breakfast       \$7 Per Day									
Lunch           \$12 Per Day									
Dinner          \$18 Per Day									
C. Commercial Fare for Travel ***									
D. Lodging Expenses ***									
E. Registration Fees ***									
F. Telephone									
G. Parking/Tolls ***									
H. Other Expenses: (itemize below) ***									
I. TOTAL (vertical and horizontal)									

## Mileage for Personal Auto:

Date	From	To	Odometer Reading		Mileage Claimed	Rate Per Mile	Amount
			Begin	End			
						\$0.700	
						\$0.700	
						\$0.700	
						\$0.700	
						\$0.700	
						\$0.700	
						\$0.700	
J. TOTAL - Mileage Expense							

TALLY: TOTAL EXPENSES (Add lines "I" & "J") \$ \_\_\_\_\_  
Less: Cash Advanced ( \_\_\_\_\_  
**Balance Due Employee: \$** \_\_\_\_\_

Expense Account Number: \_\_\_\_\_

I certify that the travel indicated hereon was accomplished according to travel authorization, that the information shown hereon is correct and that all expenses were of a business nature.

Signed: \_\_\_\_\_ Reviewed by Finance/Accounts Payable: \_\_\_\_\_  
(Employee)

Approved: \_\_\_\_\_  
(Finance Officer/Director) (Date)