

**TRAVEL EXPENSE STATEMENT**

Please check one

Employee  Student  Other

EMPLOYEE NAME \_\_\_\_\_

EMPLOYEE EMAIL \_\_\_\_\_

HOME ADDRESS/DEPARTMENT (required) \_\_\_\_\_

DATE(S) OF TRAVEL \_\_\_\_\_

DESTINATION \_\_\_\_\_

PURPOSE OF TRAVEL \_\_\_\_\_

POST TO THESE ACCOUNT NUMBERS:	
SPEEDTYPE	AMOUNT
	0.00
SPEEDTYPE	AMOUNT
	0.00
SPEEDTYPE	AMOUNT
	0.00
Less Travel Advance	
TOTAL	\$0.00
PLUS PRE-PAIDS/PCard	\$0.00
<b>TOTAL EXPENSES</b>	<b>\$0.00</b>

TRANSPORTATION EXPENSE:	
PERSONAL AUTO @ Tier 2 Rate	MILES @ 20 CENTS PER MILE @ Tier 2 Rate (effective Jan 1, 2019) 0.00
PERSONAL AUTO @ Tier 1 Rate (Use only if fleet car not available)	MILES @ 58 CENTS PER MILE @ Tier 1 Rate (effective Jan 1, 2019) 0.00
AIRFARE	0.00
MISC (PARKING, RENTAL CAR ,ETC).....	0.00
	<b>TRANSPORTATION \$0.00</b>

LODGING & MEALS EXPENSE:	
<b>REMEMBER TO SUBTRACT DAILY COMMUTING MILES FROM YOUR CALCULATIONS!</b>	
IN STATE PER DIEM RATES ARE AS FOLLOWS: BREAKFAST \$6, LUNCH \$7, DINNER \$15	
IN STATE HIGH COST PER DIEM RATES ARE AS FOLLOWS: BREAKFAST \$7, LUNCH \$9, DINNER \$20	
HIGH COST AREAS IN GEORGIA ARE: CHATHAM, COBB, DEKALB, FULTON, GLYNN, & RICHMOND COUNTIES	
****Per Diem on the first and last day of travel are paid at 75%****	
DAILY TOTALS	
DATES	
ROOM	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00
BREAKFAST	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00
LUNCH	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00
DINNER	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00
	<b>ROOM &amp; MEALS \$0.00</b>

MISC EXPENSE:	
	<b>LIST AND RECORD AMOUNTS</b>
	0.00
	0.00
	0.00

PRE-PAID EXPENSES:		P-CARD EXPENSES:		MISC	
Air Fare	\$0.00	Air Fare	\$0.00		
Hotel	\$0.00	Hotel	\$0.00		
Registration	\$0.00	Registration	\$0.00		
Other	\$0.00	Other	\$0.00		
<b>TOTAL</b>	<b>\$0.00</b>	<b>TOTAL</b>	<b>\$0.00</b>	<b>TOTAL EXPENSE</b>	<b>\$0.00</b>

(TOTAL CHARGES SHOULD EQUAL TOTAL EXPENSE)

REIMBURSEMENT DUE TO EMPLOYEE:	
TOTAL EXPENSES	\$0.00
LESS P-CARD EXPENSES	\$0.00
<b>NET EXPENSES</b>	<b>\$0.00</b>
LESS TRAVEL ADVANCE	\$0.00
<b>PAYABLE TO EMPLOYEE</b>	<b>\$0.00</b>

SIGNATURE OF EMPLOYEE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF DEPARTMENT HEAD \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF BUSINESS/FISCAL OFFICER \_\_\_\_\_ DATE \_\_\_\_\_