


**CITY OF JACKSONVILLE
TRAVEL FORM**

VP# _____

SECTION I APPROVAL TO TRAVEL

TRAVELERS NAME: _____ DESTINATION: _____ TRAVEL DATES: FR.. _____ TO _____
 DEPT./DIVS.: Jacksonville City Council INDEX: 3CDE011AD SUB-OBJ.: 4002 REASON: _____
 APPROVING _____ ESTIMATED TOTAL: \$7,000.00 Employee Number _____
 AUTHORITY: _____ TOTAL EXPENSE NOT TO EXCEED: \$7,000.00 **ADVANCED CHECK NOTIFICATION:** _____ PHONE _____
PRINT NAME: Aaron Bowman, Council President **DATE:** _____ ADDITIONAL INFO. CONTACT: _____ PHONE _____

SECTION II ADVANCE REQUEST

MAKE CHECK PAYABLE TO: _____ VENDOR PURCHASE CHECK
 TAX ID # CARD
FURNISH; TAX ID NUMBER, NAME AND COMPLETE ADDRESS
 AIRLINE TICKET  \$ _____ \$ _____ PAID w/ PURCHASE CARD
 _____ \$ _____ \$ _____ TRANSPORTATION: OTHER THAN FLIGHT
 _____ \$ _____ \$ _____ LODGING
 _____ \$ _____ \$ _____ REGISTRATION:
 *COPY OF AD AND REGISTRATION REQUIRED
 PAYABLE TO TRAVELER \$ _____ \$ _____ MEALS
 *TRAVEL MUST BE 5 DAYS OR LONGER
TOTAL ADVANCES \$ 0.00 BALANCE FOR OTHER EXPENSES 7,000.00

ACCOUNTING
AUDIT: _____
DATE: _____

**ALL ADVANCES MUST BE REPORTED ON THE EXPENSE SECTION OF THIS FORM AND JUSTIFIED WITH PAID RECEIPTS.

SECTION III EXPENSE REPORT ATTACH ORIGINAL PAID RECEIPTS

DATE & HOUR OF TRAVEL	DATE:	DATE:	DATE:	DATE:	DATE:	TOTALS																								
Time of Departure: _____ am pm Time of Return: _____ am pm																														
TRANSPORTATION (Airline Only)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
LODGING (SINGLE ROOM)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
REGISTRATION:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
MEALS -PER-DIEM \$50	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
<table border="1"> <tr> <td>DEPART</td> <td>RETURN</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>BREAKFAST \$10 - before 6am</td> <td>after 8am</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ <u>0.00</u></td> </tr> <tr> <td>LUNCH \$14 - before 12pm</td> <td>after 2pm</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ <u>0.00</u></td> </tr> <tr> <td>DINNER \$26 - before 6pm</td> <td>after 8pm</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ <u>0.00</u></td> </tr> </table>	DEPART	RETURN					BREAKFAST \$10 - before 6am	after 8am	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>	LUNCH \$14 - before 12pm	after 2pm	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>	DINNER \$26 - before 6pm	after 8pm	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>						
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DINNER \$26 - before 6pm	after 8pm	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																									
PARKING	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
TAXI	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
COMMUNICATION (BUSINESS)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
TOLLS	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
BAGGAGE TIPS - requires authorizing memo for more than \$2 in/\$2 out	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>0.00</u>																								
Taxes (for Accounting only)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____																								
AUTO MILEAGE:		TO DESTINATION	FROM DESTINATION	TOTAL MILES																										
TO & FROM DESTINATION		_____	_____	_____	MULTIPLIED	\$ <u>0.00</u>																								
VICINITY MILES		_____	_____	0	BY THE CURRENT	\$ <u>0.00</u>																								
AIRPORT MILES (LIMIT 15 EACH WAY)		_____	_____	0	RATE PER MILE	\$ <u>0.00</u>																								
DRIVER LICENSE CERTIFICATION		YES	NO																											
						TOTAL EXPENSES: \$ <u>0.00</u>																								
						LESS ADVANCES \$ <u>0.00</u>																								
						CITY REFUND \$ <u>0.00</u>																								
						TRAVELER REFUND \$ <u>0.00</u>																								

I HEREBY CERTIFY OR AFFIRM THAT THIS TRAVEL CLAIM IS TRUE AND CORRECT IN EVERY MATERIAL MATTER, THAT EXPENSES WERE ACTUALLY INCURRED BY THE TRAVELER AS NECESSARY TRAVEL EXPENSES IN THE PERFORMANCE OF OFFICIAL DUTIES, AND THAT SAME CONFORMS IN EVERY RESPECT WITH THE REQUIREMENTS OF CHAPTER 106, PART 7, OF THE ORDINANCE CODE OF THE CITY OF JACKSONVILLE.

REIMBURSEMENT: \$ 0.00

APPROVED BY: _____ DATE: _____ TRAVELER SIGNATURE: _____ DATE: _____
 PRINT NAME: Aaron Bowman, Council President PHONE: 630-1386 PRINT NAME: _____ PHONE: _____

ACCOUNTING
AUDIT: _____
DATE: _____