



QRG 7:

REIMBURSEMENT OF TRAVEL AND OTHER EXPENSES INCURRED IN THE DISCHARGE OF OFFICIAL DUTY

AP01

Job Aid AP01-QRG7

The purpose of this job aid is to show the form to use for reimbursement of travel and other expenses incurred in the discharge of official duty.

REIMBURSEMENT OF TRAVEL AND OTHER EXPENSES INCURRED IN THE DISCHARGE OF OFFICIAL DUTY

INSTRUCTIONS TO CLAIMANT: Submit one original to Accounting. Attach all necessary receipts and other supporting documents to this form. Retain one (1) copy for your records. Please complete AMOUNT, COMPANY, ACCOUNT, and CENTER fields. Must be filed at least monthly and not later than 30 days after month ends. Must be prepared ink or typed.

Payee's Name (First, Middle Initial, Last)	Division/Section	Soc. Sec. #
Payee's Address (Street)	Title	Headquarters (City)
(City, State, Zip)	Period Covered by this Request (from/to)	

Under penalties of perjury, I certify this is a true and accurate statement of the city of lodging, expenses and allowances incurred in the service of the State.

I have examined this reimbursement request and certify that it is just and reasonable.

(Claimant)

(Date)

(Supervisor)

(Date)

NOTE: ORIGINAL SIGNATURE AND DATES ARE REQUIRED FOR PROCESSING

Accounting Office Use Only			
Pay Entity:	<input type="text"/>	Control #:	<input type="text"/>
Expense Voucher No.:	<input type="text"/>		
Payment Due Date:	<input type="text"/>	< OR >>	Terms Code: <input type="text"/>
REMIT MESSAGE: (Write check disposition instructions on this line.)			

Line No.	AMOUNT	COMPANY	ACCOUNT	CENTER	ACCRUAL CODE
0001					
0002					
0003					
0004					
Total Expense		Approved as to proper travel chargeable to above accounting code verified as conforming to authorized			
Less Advance		reimbursable expenses.			
Tot. Due (Owe)		A/P Accountant			

Day	Travel (show each city visited)		Transportation			Subsistence			Misc. Expenses		
	from	to	1	In-	Out-of-	2	In-State	Out-of-State	Out-of-Country	Explanation	Amount
Depart			G			B					
Arrive			A			L					
Daily Private Car Mileage @ /mi			O			D					
Daily Private Car Mileage @ /mi			P			H					
						tot					
Depart			G			B					
Arrive			A			L					
Daily Private Car Mileage @ /mi			O			D					
Daily Private Car Mileage @ /mi			P			H					
						tot					
GRAND TOTALS											

(1) Mode of Travel:
P - Private Car
A - Air

G - Ground, rail, bus, taxi, parking fees
O - Other

(2) Type of Subsistence:
B - Breakfast
L - Lunch
D - Dinner
H - Housing (Room)

NOTE: Daily total of subsistence not to exceed authorized amount for in-state or out-of-state travel.