

City of Tukwila Expense Reimbursement Form Expense Reimbursement Policy

EMPLOYEE INFO	RMATION		EXPENSE IN	FORMATI	ON					
Name			Reason/Purp	Reason/Purpose for Expense						
Department			Required for	r Travel Re	imbursement	Only		_		_
Residence Address			Travel Destination			Travel Date		Travel Start Time		Travel End Time
Budget Code					START					
PA Code					END					
		OTHER	MILEAGE			LODGING MEALS				
Date	Purchase/Activity Description	Amount	Miles Traveled	Mileage Rate	Mileage	Amount	Breakfast	Lunch	Dinner	Total Reimbursement Amount
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EXPENSE REIMBU	JRSEMENT CHECKLIST FOR ATTACHMENTS							EXPENSE SUN	MARY (Finance	Use Only)
							Mileage		\$ -	
	Mapped travel route for claimed mileage									\$ -
							Meals			
						Other Expens		5 -		
	Conference/Meeting Agenda Flight Itinerary (tickets)							lota	I Reimbursemen	
	i light full trains (lickets)									
EMPLOYEE CERT										
	by that the statements in the above schedule are true and just in all respects; the payment of the amount any other sources; that travel performed by me for which reimbursement is claimed was performed wh									
included for expenses	of a personal or political nature or for any other expenses not authorized by Tukwila Municipal Code; t	hat the most econd	onomical means available were			Employee Certification			Date	
used to accomplish this business travel; and that I actually incurred or paid the operating expenses of the motor vehicle for vehicle for vehicle. The signatures on this form constitute approval for use of private auto within the Tukwila area or a 50-mile radius of the										
use of private auto have been met and adhered to."			mat the condition	and or the						
Last Revised 8/2015					1	Approval				Date