
 CITY OF MUKILTEO	TRAVEL AUTHORIZATION				EMPLOYEE/CLAIMANT:						
					DEPARTMENT/DIVISION:						
*Must be completed & approved prior to city funds being committed *Fill in shaded fields *Attach all required documentation per travel policy *For meal per diem add \$1 to breakfast, \$1 to lunch, \$3 to dinner for incidentals					OFFICIAL RESIDENCE:						
					DUTY STATION:						
PURPOSE OF TRAVEL:					REGULAR SCHEDULE:						
					ITEMIZATION OF ESTIMATED TRAVEL EXPENSES					HARDSHIP TRAVEL ADVANCE REQUEST	
					DESCRIPTION	EST. AMOUNT					
ACCOMPANYING TRAVELERS:					REGISTRATION FEES	\$					
					TRANSPORTATION					AIR	\$
										BUS	\$
										TRAIN	\$
										TAXI	\$
										TOLLS	\$
										PARKING	\$
										RENTAL CAR	\$
										PRIVATELY OWNED VEHICLE IF NO CITY VEHICLE AVAILABLE	
					# Miles	0	X Rate	\$ 0.580	\$ -	May be requested only for estimated cost of meals (per diem) exceeding \$50 that have not been prepaid by the City. 	
LODGING GSA PER DIEM RATE											
# Nights		X Rate	\$ -	\$ -							
MEAL PER DIEM: IF NOT INCLUDED IN REGISTRATION OR HOTEL FEE											
BREAKFAST 6:30A-7:30A	\$ -	X # days		\$ -							
LUNCH 12:00P-1:00P	\$ -	X # days		\$ -							
DINNER 5:00P-6:00P	\$ -	X # days		\$ -							
TOTAL					\$ - \$ -						
EMPLOYEE/CLAIMANT SIGNATURE			DATE	EXPENDITURE ACCOUNT NUMBER(S)							
CITY MANAGER APPROVAL IF LODGING EXCEEDS GSA RATE			DATE	APPROVAL SIGNATURE		DATE					

CITY OF MUKILTEO		TRAVEL EXPENSE VOUCHER										EMPLOYEE/CLAIMANT:		0									
		DEPARTMENT/DIVISION:		0		OFFICIAL RESIDENCE:		0		DUTY STATION:		0		REGULAR SCHEDULE:		0							
<p>*Only for travel as defined in the city's travel policy; non-travel meal allowances as authorized under collective bargaining agreements processed through payroll as a taxable fringe benefit *Fill in shaded fields; employee/destination information will autofill from Travel Authorization *Attach approved Travel Authorization & required documents/receipts *For meal per diem add \$1 to breakfast, \$1 to lunch, \$3 to dinner for incidentals *For City Manager/Council: signature date must be same as date it was approved by the governing body</p>												PURPOSE OF TRAVEL:				0							
TRIP INFORMATION								MEALS & LODGING BASED ON GSA PER DIEM RATE				PRIVATELY OWNED VEHICLE			AMOUNT DUE TO CLAIMANT	AMOUNT PRE-PAID BY INVOICE OR CITY P-CARD	GRAND TOTAL						
DATE	FROM	TO	TRIP TIME		AIRFARE BUS TRAIN RENTAL CAR	TAXI TOLLS PARKING	REGIS- TRATION FEES	*PER DIEM FOR MEALS			MEALS SUBTOTAL	LODGING	MILEAGE										
			DEPART	RETURN				BRKFST 6:30A- 7:30A	LUNCH 12:00P- 1:00P	DINNER 5:00P- 6:00P			MILES DRIVEN	IRS MILEAGE RATE	TOTAL MILEAGE AMOUNT								
TOTALS:												\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
												LESS TRAVEL ADVANCE			\$	-							
												TOTAL DUE TO CLAIMANT			\$	\$0.00							
DETAILS/NOTES IF NEEDED FOR ANY ITEMS LISTED ABOVE										EXPENDITURE ACCOUNT NUMBER(S)						AMOUNT							
I, the undersigned, hereby certify under penalty of perjury that this is a true and correct claim for necessary expenses incurred by me in performance of official City business and that no payment has been received by me on account thereof.										APPROVAL SIGNATURE						TITLE		DATE					
EMPLOYEE SIGNATURE										DATE						CITY MANAGER APPROVAL IF LODGING EXCEEDS GSA RATE		TITLE		DATE			