CITY OF SOMERSET TRAVEL EXPENSE VOUCHER

Employee Name							Advanceme	nt			
Department							Reimbursement				
Date Submitted											
Date Reque	sted By										
				· · - · · · · · · · · · · · · · · · ·		•					
Date		Loc	Purpose of Trip								
Month/Day	Year	Departure	Destination			-	-				
				7							
Time Of				Daily Expenses							
Departure	Return		7	Breakfast	Lunch	Dinner	Parking	Lodging	Mileage	Daily Total	
Date		Loca	Purpose of Trip								
Month/Day Year		Departure	Destination	1							
·				1							
Time Of					Daily Expenses						
Departure	Return			Breakfast	Lunch	Dinner	Parking	Lodging	Mileage	Daily Total	
Date Location			ation			0	urpose of Tri	in			
Month/Day Year		Departure	Destination	 	r urpose or rrip						
Withinitia	1641	Осранаю	Destination	-							
Time Of			Daily Expenses								
Departure Return				Breakfast	Lunch	Dinner	Parking	Lodging	Mileage	Daily Total	
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Date		Location		Purpose of Trip							
Date			·	 	ruipose oi Trip						
Month/Day	Year	Departure	Destination	-							
Time Of				Daily Expenses							
Departure Return				Breakfast	Lunch	Dinner	Parking	Lodging	Mileage	Daily Total	
Departure	Return			Dicariasi	Lunon	Diriter	1 arking	Lodging	Miloage	Cany Total	
					Dunner of Time						
Date		Location		Purpose of Trip							
Month/Day	Year	Departure	Destination	_							
T 0/				Daily Expenses							
Time Of				1	Lucati			Lodging	1612222	Della Tetal	
Departure	Return			Breakfast	Lunch	Dinner	Parking	Loughly	Mileage	Daily Total	
					Total Number of Miles@\$.47 per mile=\$						
By signing below I certify the expenses listed above are valid and accurate to the best of my knowledge. If mileage is claimed, I further certify a City of Somerset vehicle was not used during this time.											
				7 1					•		
Employee Signature					Departmen	t Head Appi	oval				
Please attach receipts, registrations, brochures, and/or meetings ager											
<u>Please atta</u>	ch receipts,	registrations, brochure	es, and/or meetings ag	endas if appli	cable.		Vendor#	Finance Depar Check #		y Amount Paid	