

City of Jonesboro
Employee Travel

Authorization:

Employee Name _____ Date _____

SS # _____ Department to be Charged _____

Approval is requested for the following out of city travel:

Purpose of Travel: _____

Location: _____

From _____ (Time) on _____ 19__ To _____ (Time) on _____ 19__

Supervisor Approval: _____ Date _____

Request for Reimbursement:

Reimbursement is limited to actual expenses for meals, lodging and other travel related items as prescribed by the "Travel Reimbursement Policy". All receipts must be attached to support all items included in this request.

Reimbursement is requested for the following expenses incurred:

Meals:	Breakfast	Lunch	Dinner	Total
Date	\$4.00	\$8.00	\$12.00	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Lodging:	Hotel	Room Rate	+	Tax (Rate)	=	
_____	_____	_____	+	_____	=	_____
_____	_____	_____	+	_____	=	_____

Mileage (Personal vehicle): _____ Miles x \$.25 = _____

Other: Itemize _____

Total Reimbursement Requested \$ _____

Employee Signature _____

Supervisor Approval _____

Mayor Approval _____

Finance Office Use Only

Paid To: _____
Date Paid: _____
By: _____