

# TEQUESTA GENERAL EMPLOYEES PENSION TRUST FUND

## Travel Expense Reimbursement Form

Department Name: \_\_\_\_\_ Travel Dates: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Mileage Rate: IRS Current



### Detailed Expenses:

| Transportation    | Sun | Mon | Tue | Wed | Thu | Fri | Sat | Totals |
|-------------------|-----|-----|-----|-----|-----|-----|-----|--------|
| Odometer Readings |     |     |     |     |     |     |     | 0      |
| Miles Driven      |     |     |     |     |     |     |     | 0      |
| Reimbursement     |     |     |     |     |     |     |     | \$ -   |
| Parking and Tolls |     |     |     |     |     |     |     | \$ -   |
| Auto Rental       |     |     |     |     |     |     |     | \$ -   |
| Taxi/Limo         |     |     |     |     |     |     |     | \$ -   |
| Fuel              |     |     |     |     |     |     |     | \$ -   |
| Airfare           |     |     |     |     |     |     |     | \$ -   |
| Other             |     |     |     |     |     |     |     | \$ -   |
| <b>Totals</b>     |     |     |     |     |     |     |     | 0      |

| Lodging       | Sun | Mon | Tue | Wed | Thu | Fri | Sat | Totals |
|---------------|-----|-----|-----|-----|-----|-----|-----|--------|
| Lodging       |     |     |     |     |     |     |     | \$ -   |
| Other         |     |     |     |     |     |     |     | \$ -   |
| <b>Totals</b> |     |     |     |     |     |     |     | \$ -   |

| Food          | Sun | Mon | Tue | Wed | Thu | Fri | Sat | Totals |
|---------------|-----|-----|-----|-----|-----|-----|-----|--------|
| Breakfast     |     |     |     |     |     |     |     | \$ -   |
| Lunch         |     |     |     |     |     |     |     | \$ -   |
| Dinner        |     |     |     |     |     |     |     | \$ -   |
| Other         |     |     |     |     |     |     |     | \$ -   |
| <b>Totals</b> |     |     |     |     |     |     |     | \$ -   |

| Miscellaneous        | Sun | Mon | Tue | Wed | Thu | Fri | Sat | Totals |
|----------------------|-----|-----|-----|-----|-----|-----|-----|--------|
| Supplies / Equipment |     |     |     |     |     |     |     | \$ -   |
| Phone, Fax           |     |     |     |     |     |     |     | \$ -   |
| Other                |     |     |     |     |     |     |     | \$ -   |
| <b>Totals</b>        |     |     |     |     |     |     |     | \$ -   |

| Conference/Seminar/Meeting |                       |  |  |                  |  |                     |
|----------------------------|-----------------------|--|--|------------------|--|---------------------|
| Date                       | Place Name & Location |  |  | Business Purpose |  | Registration Amount |
|                            |                       |  |  |                  |  |                     |
|                            |                       |  |  |                  |  |                     |
| <b>Totals</b>              |                       |  |  |                  |  |                     |

### Summary of Expenses

|                        |    |
|------------------------|----|
| Total Expenses         | \$ |
| Less Cash Advance      | \$ |
| Less Company Charges   | \$ |
| Amount Due to Employee | \$ |
| Amount Due to Village  | \$ |

Prepared By: \_\_\_\_\_ Date: \_\_\_\_\_

Signature \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Signature \_\_\_\_\_

Account # \_\_\_\_\_

Account # \_\_\_\_\_