JOINT COMMITTEE TRAVEL EXPENSE INFORMATION SHEET

This form **must** be filled out completely.

Please attach receipts for transportation, lodging, parking, and miscellaneous expenses

Na	me:		Jo	int Committ	ee:					
Pu	rpose of Trip:									
			To:					_		
De	stination:									
I	Transportation	n								
	A. Personal Car: Yes		No	If yes—	From: _		To:			
				Total Miles:			@ 0.655 =			
	B. Airfare:	Yes	No	If yes—	Was the t	icket charged to	the Council?	Yes	No	
				What was	the cost of th	ne ticket?				
	C. Rental Car:	Yes	No	If yes—	Was the r	ental charged to	the Council?	Yes	No	
				What was	What was the cost of the rental?					
	D. Taxi	Yes	No	If yes—	Was the t	axi fee charged t	o the Council?	Yes	No	
	Please itemize taxi expenses below. Attach receipt if taxi expense was \$10.00 or more.									
	From:			To:			Cost:			
	From:									
II Meals & Lodging Please attach hotel receipt with a a						dollar balance	e.			
	How was the hotel paid?		Personal Credit Card Direct Bill							
			Daily Rate	Hotel Tax	Meal 1	Meal 2	Meal 3	Meal Total	Daily Total	
		Day 1								
		Day 2								
		Day 3								
		Day 4								
		Day 5								
		Day 6								
		Day 7								
		TOTAL								
Ш	Parking		Location:					Cost:		
								Cost:		
IV	Miscellaneous Expenses		Expenses that are not covered above (official phone calls, gas for rental car, internet, etc.)							
			Cost:							

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V	Travel Record				
	Left Base:	Date:			
	Returned to Base:	Date:			
	Date	Description			
C	ommittee Member Sig	nature:		Date:	
Chair/Designee Signature:				Date:	
			Date		