



Complete the yellow cells

Travel Request and Authorization (TRA)

This form is required for all overnight travel or if local registration is over \$1000 and must be approved in advance. Advances will not be issued for local expenses. (Admin Guideline F-01).

TRA estimate expenses must be within 10% of Business Expense Stmt(BES).

Name:	Jill K.B. Kenney	Employee #	198722	Department	Municipal Court
Purpose of Travel:	All Rise Conference		Destination: Kissimmee, FL		
Departure Date:	5/27/25	Return Date:	5/31/25		
Comments:					
Sharing hotel room? Whom with	N/A		Workday Account Info:	Court Admin Training and Education	

	Amount to City PCard	Amount to Vendor	Amount to Employee	
Registration:	895.00			
Airfare:	776.00			
Lodging:	630.00			Lodging Rate # days 13% Total
Car Rental:				140.00 per day @ 4 17.50 630.00
KCI Airport parking:				
	Meals Overnight Travel Search for City - GSA.gov website			Per Diem for Meals Rate # of days
	Enter Per Diem Rate (cell F21)			Per Diem rate 80.00 4.0 320.00
	M&IE Meal breakdown will auto populate			M&IE Breakdown - Deduct meals provided
				Breakfast 19.00 -
				Lunch 20.00 3 60.00
				Dinner 35.00 -
Per Diem for Meals:	No receipts required		260.00	
Private Vehicle Mileage:			53.90	77 Miles @ 0.700 per mile
Cab/Shuttle fares/				
Tolls/Baggage fees:				
Fuel - City Vehicle:				
Other:				Describe:

Amount Charge on City P Card	2,301.00
Amount to Vendors	-
Travel Advance = Amount to Employee	313.90
TOTAL ESTIMATED EXPENSES	2,614.90

ACH direct deposit rather than a check can be provided. Complete and submit - [AP ACH Form](#)

	Approved	Disapproved	Date
/s/ Jill K.B. Kenney	<input type="checkbox"/>	<input type="checkbox"/>	
Employee Signature			
Division Manager Signature	<input type="checkbox"/>	<input type="checkbox"/>	
Department Director Signature	<input type="checkbox"/>	<input type="checkbox"/>	
City Manager Signature (if required)			