

Complete the yellow cells **BUSINE** Statement to be completed according to Admin. Reg. F-01

Business Expense Statement (BES)

Form must be submitted by the 15th of the following month. Attach a memo to the Approving Authority with their approval if late or grand total exceeds 10% of Travel Authorized. BES expenses must be within 10% of Travel Request Authorization(TRA).

Name:	Matthew Sch	Matthew Schoonover		Employee # 0		Department: CMO				
Business Expense Purpose:	Visit Washing	ton Delegates			Destination:	Washington, DC				
Departure Date:	5/13/25	Return Date:	5/14/25			_				
Comments:	0					E1 B	udgeted Acct #	0.000	000	
Sharing hotel room?	Whom with:	0								J
Total Expenses from TRA		BES	Paid with City PCard	Paid to Vendor	Paid by Employee	]				
Registration:	-	Registration:								
Airfare:	600.00	Airfare:	572.96							
Lodging:	1,265.00	Lodging:	632.83			Include all cost & fees - Itemized receipt for Lodging require				
Car Rental:	-	Car Rental:								
KCI Airport parking:	30.00	KCI Airport parking:								
			Mea	ls Overnight T	ravel	Per Diem:	<u>Rate</u>	# of days		1
			Search fo	Search for City - GSA.gov website			92.00	2.0	184.00	
						Meals Provided	will deduct fror	n per diem:		
						Breakfast	23.00		-	
Per Diem for Meals:	177.00					Lunch	26.00		-	
	-		M&IE Meal breakdown will auto populate			Dinner	38.00	2	76.00	
		Per Diem for Meals:		No receipts required 108.00						1
		STOP	Go to Page 2 Now and complete then RETURN her			ere to allocate exp	ense & complete	the BES		
		Allocate Page 2 Totals to			Paid by	Totals from				
		yellow cells	PCard	Vendor	Employee	page 2		-		
Private Vehicle Mileage:	56.00	Mileage:			56.00	56.00	Comments:			
Cab/Shuttle fares/		Cab/Shuttle fares/	,							
Tolls/Baggage fees		Tolls/Baggage fees:			56.00	56.00				
Fuel - City Vehicle:	-	Fuel - City Vehicle:								
		Business Meeting:								
Miscellaneous Expense:		Miscellaneous Expense:				-	-			
TOTAL TRA ESTIMATED EXPENSES	<b>2</b> ,278.00		то	TAL EXPENSES	1,425.79	=				
	Total Expensed paid by employee 220.00					_	ACH direct deposit rather than a check			
Travel Advance issued to Employee -						-	can be provided. Complete and submit			
Amount owed Employee/ (owed to City) 220.00 AP ACH form										
I certify that I have incurred all of the expenses listed above on behalf of the City and that they are directly related to the active conduct of the City's business.										
Employee Signature	Date	Division Manager Signature	Date	Departme	nt Manager	Date	City Manager Signa	ture (if require	ed)	Date

## Business Expense Statement continued

Name: Matthew Schoonover							<u>CMO</u>		
Business Expe	ense Purpose:	Washington, DC							
	Mileage log may be used for detail				Rate \$0.700				
Mileage Calculation:		Destination					Amount		
-		airport roundtrip mileage				80			
							-		
							-		
							-		
							-		
						Total	56.00		
Cab/Shuttle fares/Tolls:	Data	Description				Amount	I		
Cab/Shuttle Tares/Tolls.		uber to hotel			Amount 56.00				
	5/14/25					50.00			
					Total	56.00			
Fuel - City Vehicle:	Data	Amount	Meals Local:	Date	Breakfast	Lunch	Dinner	Maximum a	llowed
Fuel - City Venicle.	Dale	Amount	IVIEDIS LOCAI.	Date	DIEdKIdSL	Lunch	Diffier	Breakfast	15.00
								Lunch	16.00
								Dinner	28.00
									re required
								neccipts u	crequired
	Total	-		Total	-				
Business Meeting & Guests:	Total			-		:			
				1					
Date	Purpose			Firm & Persons Present					Amount
								Total	-
Miscellaneous Expense:	Date	Description				Amount		-	
							l		Page 2 of 2
	Total								