



Complete the yellow cells

Business Expense Statement (BES)

Statement to be completed according to Admin. Reg. F-01

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: | Michael Wilkes | Employee # | 124702 | Department: | CMO | |
| Business Expense Purpose: | NLC City Summit | Destination: | San Antonio, TX | | | |
| Departure Date: | 11/19/19 | Return Date: | 11/23/19 | | | |
| Comments: | 0 | | | | E1 Budgeted Acct # | 1001020.62220 |
| Sharing hotel room? Whom with: | 0 | | | | | |

| Total Expenses from TRA | | BES | Paid with City Card | Paid to Vendor | Paid by Employee | |
|---------------------------------------|-----------------|--|---|----------------|------------------|---|
| Registration: | 560.00 | Registration: | 560.00 | ✓ | | |
| Airfare: | - | Airfare: | | | 350.96 | ✓ |
| Lodging: | 1,053.40 | Lodging: | | | 812.10 | ✓ |
| Car Rental: | - | Car Rental: | | | | |
| KCI Airport parking: | 36.00 | KCI Airport parking: | | | 73.50 | ✓ |
| Per Diem for Meals: | 244.00 | Meals: <i>Go to page 2 for breakdown</i> | | | | |
| | | Search for Olathe BES on the website | | | | |
| | | M&IE Meal breakdown will auto populate | | | | |
| | | Per Diem for Meals: | | | 264.00 | ✓ |
| | | STOP | Go to Page 2 Now and complete then RETURN here to allocate expense & complete the BES | | | |
| | | Allocate Page 2 Totals to yellow cells | | | | |
| Private Vehicle Mileage: | 46.40 | Mileage: | | | 46.40 | ✓ |
| Cab/Shuttle fares/Tolls/Baggage fees: | 150.00 | Cab/Shuttle fares/Tolls/Baggage fees: | | | 66.65 | ✓ |
| Fuel - City Vehicle: | - | Fuel - City Vehicle: | | | | |
| Miscellaneous Expense: | - | Miscellaneous Expense: | | | 10.00 | ✓ |
| TOTAL TRA ESTIMATED EXPENSES | 2,089.80 | TOTAL EXPENSES | | | 2,183.61 | ✓ |
| | | Total Expensed paid by employee | | | 1,623.61 | ✓ |
| | | Travel Advance issued to Employee | | | | ✓ |
| | | Amount owed Employee/ (owed to City) | | | 1,623.61 | ✓ |

Include all cost & fees - Itemized receipt for Lodging required

| Per Diem: | Rate | # of days | Total |
|---|-------|-----------|--------|
| | 66.00 | 4.0 | 264.00 |
| Meals Provided will deduct from per diem: | | | |
| Breakfast | 16.00 | | - |
| Lunch | 17.00 | | - |
| Dinner | 28.00 | | - |

REVIEWED
By Tracy Fiorini at 9:57 am, Nov 25, 2019

ACH direct deposit rather than a check can be provided. Complete and submit 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: 11/25/19
 Division Manager Signature: _____ Date: _____
 Department Manager: _____ Date: _____
 City Manager Signature (if required): _____ Date: _____

Business Expense Statement continued

Name: Michael Wilkes
 Business Expense Purpose: San Antonio, TX

Department: CMO

| Mileage Calculation: | | <i>Mileage log may be used for detail</i> | Rate | \$0.58 |
|----------------------|-------------|---|--------|--------|
| Date | Destination | Miles | Amount | |
| | | | | - |
| | | | | - |
| | | | | - |
| | | | | - |
| Total | | | | - |

| Cab/Shuttle fares/Tolls: | Date | Description | Amount |
|--------------------------|----------|--|--------|
| | 11/20/19 | Urber - Mayor, John Bacon, Michael Wilkes to Hotel | 43.75 |
| | 11/21/19 | Urber - Dinner | 7.17 |
| | 11/23/19 | Urber - To Airport | 15.73 |
| | | | |
| | Total | | 66.65 |

| Fuel - City Vehicle: | Date | Amount | |
|----------------------|-------|--------|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | Total | | - |

| Meals Local: | Date | Breakfast | Lunch | Dinner | |
|--------------|-------|-----------|-------|--------|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Total | | | | - |

Maximum allowed:
 Breakfast 15:00
 Lunch 16:00
 Dinner 28:00
Receipts are required

Business Meeting & Guests:

| Date | Purpose | Firm & Persons Present | Amount |
|-------|---------|------------------------|--------|
| | | | |
| | | | |
| | | | |
| Total | | | - |

| Miscellaneous Expense: | Date | Description | Amount |
|------------------------|----------|-------------|--------|
| | 11/21/19 | Cash Tip | 10.00 |
| | | | |
| | | | |
| | | | |
| | Total | | 10.00 |