



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:	Michael Wilkes	Employee #		Department	CMO
Purpose of Travel:	to meet with delegates			Destination:	Washington, DC
Departure Date:	5/14/24	Return Date:	5/16/24		
Comments:					
Sharing hotel room? Whom with:				E1 Budgeted Account #	city/educa/train

	Amount to City PCard	Amount to Vendor	Amount to Employee				
Registration:							
Airfare:	600.00			Lodging Rate	# days	15%	Total
Lodging:	1,380.00			600.00 per day @	2	90.00	1,380.00
Car Rental:							
KCI Airport parking:	36.00						
	Meals Overnight Travel Search for City - GSA.gov website Enter Per Diem Rate (cell F21)			Per Diem for Meals	Rate	# of days	
				Per Diem rate	79.00	3.0	237.00
				M&IE Breakdown - Deduct meals provided			
				Breakfast	19.00		-
				Lunch	20.00		-
				Dinner	35.00	1	35.00
	M&IE Meal breakdown will auto populate						
Per Diem for Meals:	No receipts required		202.00				
Private Vehicle Mileage:			53.60	80	Miles @	0.670	per mile
Cab/Shuttle fares/ Tolls/Baggage fees:	150.00						
Fuel - City Vehicle:							
Other:				Describe: _____			

Amount Charge on City P Card 2,166.00

Amount to Vendors -

Travel Advance = Amount to Employee 255.60

TOTAL ESTIMATED EXPENSES 2,421.60

ACH direct deposit rather than a check
can be provided. Complete and submit -
AP ACH Form

Employee Signature

Division Manager Signature

Department Director Signature

City Manager Signature (if required)

Approved Disapproved Date

☐☐☐☐☒☐

4/23/24

SA 1000240

Sub 4/24