



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:	Dean Vakas	Employee #		Department	CMO
Purpose of Travel:	Attend NLC Conference			Destination:	Washington, DC
Departure Date:	3/9/25	Return Date:	3/11/25		
Comments:					
Sharing hotel room? Whom with:			E1 Budgeted Account #		

	Amount to City PCard	Amount to Vendor	Amount to Employee				
Registration:	780.00						
Airfare:	600.00			Lodging Rate	# days	15%	Total
Lodging:	1,293.75			375.00	per day @	3	56.25 1,293.75
Car Rental:							
KCI Airport parking:		60.00					
Meals Overnight Travel Search for City - GSA.gov website				Per Diem for Meals			
				Rate	# of days		
<i>Enter Per Diem Rate (cell F21)</i>				Per Diem rate	92.00	3.0	276.00
				M&IE Breakdown - Deduct meals provided			
				Breakfast	23.00		-
				Lunch	26.00		-
				Dinner	38.00		-
<i>M&IE Meal breakdown will auto populate</i>							
Per Diem for Meals:	<i>No receipts required</i>		276.00				
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	2,823.75
Amount to Vendors	60.00
Travel Advance = Amount to Employee	329.60
TOTAL ESTIMATED EXPENSES	3,213.35

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

	Approved	Disapproved	Date
Employee Signature	<input type="checkbox"/>	<input type="checkbox"/>	
Division Manager Signature	<input type="checkbox"/>	<input type="checkbox"/>	
Department Director Signature	<input type="checkbox"/>	<input type="checkbox"/>	
City Manager Signature (if required)	<input type="checkbox"/>	<input type="checkbox"/>	



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:	Dean Vakas	Employee #	0	Department:	CMO
Business Expense Purpose:	Attend NLC Conference			Destination:	Washington, DC
Departure Date:	3/9/25	Return Date:	3/11/25		
Comments:	0			E1 Budgeted Acct #	0.00000
Sharing hotel room? Whom with:	0				

Total Expenses from TRA		BES	Paid with City PCard	Paid to Vendor	Paid by Employee														
Registration:	780.00	Registration:				<i>Include all cost & fees - Itemized receipt for Lodging required</i>													
Airfare:	600.00	Airfare:																	
Lodging:	1,293.75	Lodging:																	
Car Rental:	-	Car Rental:																	
KCI Airport parking:	60.00	KCI Airport parking:																	
		Meals Overnight Travel Search for City - GSA.gov website			<table border="1"> <tr> <td>Per Diem:</td> <td>Rate</td> <td># of days</td> <td></td> </tr> <tr> <td></td> <td>92.00</td> <td></td> <td>-</td> </tr> </table>		Per Diem:	Rate	# of days			92.00		-					
Per Diem:	Rate	# of days																	
	92.00		-																
Per Diem for Meals:	276.00	M&IE Meal breakdown will auto populate			Meals Provided will deduct from per diem:														
		Per Diem for Meals: <i>No receipts required</i>			#N/A	<table border="1"> <tr> <td>Breakfast</td> <td>#N/A</td> <td></td> <td>#N/A</td> </tr> <tr> <td>Lunch</td> <td>#N/A</td> <td></td> <td>#N/A</td> </tr> <tr> <td>Dinner</td> <td>#N/A</td> <td></td> <td>#N/A</td> </tr> </table>		Breakfast	#N/A		#N/A	Lunch	#N/A		#N/A	Dinner	#N/A		#N/A
Breakfast	#N/A		#N/A																
Lunch	#N/A		#N/A																
Dinner	#N/A		#N/A																
		STOP Go to Page 2 Now and complete then RETURN here to allocate expense & complete the BES																	
		Allocate Page 2 Totals to yellow cells	Paid with City PCard	Paid to Vendor	Paid by Employee	Totals from page 2													
Private Vehicle Mileage:	53.60	Mileage:			-	-	Comments:												
Cab/Shuttle fares/ Tolls/Baggage fees:	150.00	Cab/Shuttle fares/ Tolls/Baggage fees:				-													
Fuel - City Vehicle:	-	Fuel - City Vehicle:				-													
		Business Meeting:				-													
Miscellaneous Expense:	-	Miscellaneous Expense:				-													
TOTAL TRA ESTIMATED EXPENSES	3,213.35	TOTAL EXPENSES		#N/A															

Total Expensed paid by employee #N/A
 Travel Advance issued to Employee 329.60
 Amount owed Employee/ (owed to City) #N/A

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 _____ Division Manager Signature _____ Date _____ Department Manager _____ Date _____ City Manager Signature (if required) _____ Date _____

Business Expense Statement continued

Name: [Dean Vakas](#)
 Business Expense Purpose: Washington, DC

Department: [CMO](#)

Mileage log may be used for detail

	Date	Destination	Rate	Miles	Amount
Mileage Calculation:			\$0.655		-
					-
					-
					-
					-
				Total	-

Cab/Shuttle fares/Tolls:	Date	Description	Amount
		Total	-

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
		Total	-

Total -

Total	Breakfast	Lunch	Dinner	IE
\$51	\$11	\$12	\$23	\$5
\$54	\$12	\$13	\$24	\$5
\$55	\$13	\$14	\$23	\$5
\$56	\$13	\$14	\$24	\$5
\$59	\$13	\$15	\$26	\$5
\$61	\$14	\$15	\$27	\$5
\$66	\$16	\$17	\$28	\$5
\$64	\$14	\$16	\$29	\$5
\$69	\$16	\$17	\$31	\$5
\$74	\$17	\$18	\$34	\$5
\$79	\$19	\$20	\$35	\$5
\$76	\$18	\$19	\$34	\$5
\$0	\$0	\$0	\$0	\$0