

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 Wilke	25	Employee #	0 Depart		Department:	t: CMO			1
Business Expense Purpose:	LKM Meetings					Destination:	Garden City, Kansas			1
Departure Date:	6/5/25	Return Date:	6/6/25							
Comments:	0					E1 B	udgeted Acct #	0.000	000	
Sharing hotel room?	Whom with:	0								
		BES	Paid with City	Paid to	Paid by	1				
Total Expenses from TRA		DLO	PCard	Vendor	Employee					
Registration:	:	Registration:]				
Airfare:	: -	Airfare:]				
Lodging:	172.50	Lodging:			116.60	Include all c	ost & fees - Itemiz	ed receipt for	Lodging red	quired
Car Rental:	:	Car Rental:								
KCI Airport parking:	: -	KCI Airport parking:								_
			Meal	ls Overnight T	ravel	Per Diem:	<u>Rate</u>	# of days		
			Search for	r City - GSA.go	v website_		68.00	2.0	136.00	
						Meals Provided	will deduct from	m per diem:		
						Breakfast	16.00		-	
Per Diem for Meals:	136.00					Lunch	19.00		-	
			M&IE Meal breakdown will auto populate			Dinner	28.00	1	28.00	
		Per Diem for Meals:	No receipts required 108.00							
		STOP			then RETURN he		ense & complete	the BES		
		Allocate Page 2 Totals to	-		Paid by	Totals from				
	107.00	yellow cells	PCard	Vendor	Employee	page 2				
Private Vehicle Mileage:		Mileage:			515.20	515.20	Comments:			
Cab/Shuttle fares/		Cab/Shuttle fares/								
Tolls/Baggage fees: Fuel - City Vehicle:		Tolls/Baggage fees: Fuel - City Vehicle:				_				
ruci city veriicie.		Business Meeting:								
Miscellaneous Expense:		Miscellaneous Expense:				_	-			
TOTAL TRA ESTIMATED EXPENSES		scenarieous Experise.	TO	TAL EXPENSES	739.80					
		 Tota			739.80	•	ACH direct den	nsit rather t	han a chec	ck
Total Expensed paid by employee739.80_ Travel Advance issued to Employee -							ACH direct deposit rather than a check can be provided. Complete and submit			
Amount owed Employee/ (owed to City) 739.80							AP ACH form	a. complete	ana sabili	10
Loostifu that I have in a	socilated at			•		=	7. 7.077101111		Dago 1 ot 1	
I certify that I have incurred all of the expens	ses listea above on be	muij oj trie City and that they are direc	uy relatea to the activ	e conduct of the City's	ร มนรเทยรร.				Page 1 of 2	
Employoo Cignature	Date	Division Manager Signature	Data	Department Manager		Date	City Manager Signature (if required)			Data
Employee Signature	Date	Division Manager Signature	Date	Departmen	it ividilagel	Date	City ivialiager Signa	iture (ii require	.uj	Date

Business Expense Statement continued

Department: CMO

Name: Michael Wilkes

Business Expense Purpose: Garden City, Kansas Mileage log may be used for detail \$0.700 Rate Mileage Calculation: Date Destination Miles Amount 6/5/25 roundtrip from KC to Garden City 736 515.20 --Total 515.20 Cab/Shuttle fares/Tolls: Date Description Amount Total Fuel - City Vehicle: Date Maximum allowed: Amount Meals Local: Date Breakfast Lunch Dinner Breakfast 15.00 16.00 Lunch 28.00 Dinner Receipts are required Total Total Business Meeting & Guests: Purpose Firm & Persons Present Date Amount Total Miscellaneous Expense: Date Description Amount Total Page 2 of 2