

## CITY OF MOUNT PLEASANT Travel Request Form

EMPLOYEE:				
DEPARTMENT:				
PURPOSE (NAME OF SEMINAR):				
DESTINATION:		DATE:		
DEPARTURE TIME:		RETURN TI	ME:	
MILEAGE # OF MILES ROUND TRIP (SHORTEST ROUTE)		X \$0.655=	\$	0.00
MEALS	TIME OF DEPARTURE	AMOUNT		
DAYS AT CONFERENCE <u>EXCEPT</u> DAY OF ARRIVAL AND DEPARTURE				
FIRST DAY OF TE # OF DAYS LAST DAY OF TR Single Day Trip		X \$50.00 X \$70.00 X \$50.00 x\$ 25.00	\$ \$ \$	0.00 0.00 0.00 0.00
OTHER EXPENSES: PLEASE SUBMIT ALL REQUESTS FOR HOTEL ADVANCEMENT ON A SEPARATE PURCHASE ORDER MADE PAYABLE DIRECTLY TO THE HOTEL. IF THIS IS A REIMBURSEMENT, THEN PUT LODGING ON SEPARATE REQUEST				
TOTAL REQUEST FOR ADVANCEMENT/REIMBURSEMENT:			\$	0.00
DEPARTMENT ACCOUNT NUMBER:				
"I HEREBY CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF USE OF MY PERSONAL AUTO FOR OFFICIAL CITY BUSINESS TRAVEL AND REQUEST REIMBURSEMENT FOR THE SAME."				
EMPLOYEE GIONATURE DATE				
EMPLOYEE SIGNATURE DATE	DEPARIMENT	DIRECTOR S	IGNATURE DATE	
CITY MANAGER DATE				

\*\*OUT OF STATE TRAVEL MUST BE APPROVED BY THE CITY MANAGER\*\*