



City of Show Low Travel Authorization

INSTRUCTIONS: The employee shall complete this form and submit it to his supervisor for processing, along with a copy of the brochure. It is the employee's responsibility to reserve cars, credit cards and phone cards prior to submission of this form. If more than one check is required to be issued by Finance, a copy of this form shall be provided and the respective area highlighted for each additional check.

A. APPLICANT

Name: _____ Date Submitted: _____
 Position: _____ Department: _____
 Purpose of Trip: _____
 Dates: _____ Location: _____
 Mode of Transportation: City Car Plane Personal Car Other
 Registration check must be mailed before _____ to: _____

Accounts to be charged: _____

B. OTHER INFORMATION

Advance check: Yes No Amount: \$ Required by:
 Reserved: Car Yes No Credit Card Yes No Phone Card Yes No
 Other Financial Assistance from:
 Work days off duty: _____ Date Leaving: _____ Date Returning: _____
 Person(s) in charge in your absence: _____

C. EXPENSE VOUCHER

	ESTIMATED	ACTUAL
Registration Fee:	\$	\$
Room: _____ days @ _____ per day	\$	\$
Meals: Per Diem Actual		
Breakfasts @ _____ each	\$	\$
Lunches @ _____ each	\$	\$
Dinners @ _____ each	\$	\$
Auto: _____ miles x _____ per mile	\$	\$
Other Transportation (airfare)	\$	\$
Local Transportation (bus, taxi)	\$	\$
Other Expenses (list)	\$	\$
Total	\$	\$

D. FINAL ACCOUNTING

Total
 Actual
 Less:
 Advances
 and or ()
 City
 Payments

BALANCE DUE
 Employee
 City

ATTACH ITEMIZED RECEIPTS

E. APPROVAL (REQUIRED BEFORE TRAVEL OCCURS)

Applicant Signature	Date	Manager / Supervisor Signature	Date
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Finance Signature	Date	Manager / Supervisor Signature	Date
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POST TRAVEL