## State of North Carolina Southwestern Community College

Request for Reimbursement of Travel and Other Expenses Incurred in the Discharge of Official Duty - Including Per Diem

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Prepare two (2) copies. Attach all necessary receipts	and other supporting documents to this form and ret	ain one (1) copy for your r	ecords.	
Department or Institution	Purpose of Travel (Name of Seminar/Conference)	Budget Code(s)		
Payee's Name & Colleague ID No.	Title			
		Total Cost	\$ -	
Payee's Address	Date Submitted	Less PCard Charges (if applicable)		
		Less Advance and Rental Car Fee		
From Period covered by this voucher To	Date of Out-of-State Travel Auth.			
		Reimbursement	\$ -	
This is a true and accurate statement of expenses incurred in the service of the State	I certify that the expenses incurred are nece just and re	• • •	ounts claimed are	

Employee						Division/Department Supervisor					
Travel (show each city visited)						Subsistence		Other expenses			
Enter Date	Day One - time of Last Day - time of	of return	(1)	Private Car		(2)		Out-of-			
Day 1	то	FROM	Mode	Mileage	Amount	Type	In-State	State	Explanation	Amount	
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			0			D	-				
Day 2			R			H Total	   \$ -	¢		<b> </b>	
Day 2			Р	Ι	0	В	) a -	\$ -		\$ -	
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Day 3						Total	\$ -	\$ -		\$ -	
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Day 4						Total	\$ -	\$ -		\$ -	
			Р		0	В					
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Day 5				<u> </u>		Total	\$ -	\$ -		\$ .	
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Day 6		l	Б	T	I 0	Total	\$ -	\$ -		\$ -	
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			11				\$ -	\$ -		\$ -	
						Total Hotel	\$ -	\$ -		\$ -	
					Total Food	\$ -	\$ -				
(1) Mode of Travel: In-State Out-of-State				Total							
- Pre-Owned				\$10.10	Transportation		Total	Total		_ , , , , ; ;	
- Air Othor rail		L - Lunch \$13.30 \$13. D - Dinner \$23.10 \$26			' ' '		In-State	Out-of-State		Total Oth Expense	
<ul><li>Other, rail</li><li>Rental Car</li></ul>		- Dinner - Room	\$23.10 \$89.10	\$26.30 \$105.20	\$ -		Subsistence \$ -	Subsistence \$ -		\$ -	