

Employee completes this form within 5 business days from return of travel. Forwards to program director for review and approval. The approved expense report document is uploaded by the employee as documentation for the "Overnight Travel Expense" reimbursement claim in Paycom.

## River Valley Child Development Services

### Travel Expense Report

*due within 5 business days of return from travel*



**Name:** Jane Doe **Job Title:** Early Childhood Specialist **Program:** Choices

**Email:** jdoe@rvcds.org **Phone:** 111-222-3333 **Date of Exp. Report:** 11/9/2021

**Name of Event:** Trainer Conference **Event Location (city & state):** Phoenix, Arizona

**Event Start Date and Time:** 11/2/2021 8:00 am **Event End Date and Time:** 11/5/2021 11:00 am

**Travel Start Date and Time:** 11/1/2021 11:00 am **Travel End Date and Time:** 11/5/2021 11:00 pm

Enter the dates of travel on this row

#### Employee Reimbursable Expenses

	<u>Day 1</u>	<u>Day 2</u>	<u>Day 3</u>	<u>Day 4</u>	<u>Day 5</u>	<u>Day 6</u>	<u>Day 7</u>	
<b>Date:</b>	11/1/2021	11/2/2021	11/3/2021	11/4/2021	11/5/2021			
<b>Per Diem Allowance</b>								
Breakfast		\$ 13.00	\$ 13.00	\$ 13.00	\$ 13.00			
Lunch	\$ 15.00				\$ 15.00			
Dinner	\$ 23.00	\$ 23.00	\$ 23.00	\$ 23.00	\$ 23.00			
Incidental	\$ 5.00	\$ 5.00	\$ 5.00	\$ 5.00	\$ 5.00			
<b>Day TOTAL:</b>	<b>\$ 43.00</b>	<b>\$ 41.00</b>	<b>\$ 41.00</b>	<b>\$ 41.00</b>	<b>\$ 56.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 222.00</b>

Enter per diem allowance rates for eligible meals. No receipts required for meals. Day totals auto-calculate.

**Per Diem Allowance TOTAL**

	<u>Day 1</u>				<u>Day 2</u>				
<b># Miles:</b>	30				30				
<b>Transport. and Other</b>									
Mileage	\$ 16.80	\$ -	\$ -	\$ -	\$ 16.80	\$ -	\$ -		
Parking (attach receipt)	\$ 20.00	\$ 20.00	\$ 20.00	\$ 20.00	\$ 20.00				
Tolls (attach receipt)									
Comm. Trans. (attach receipt)	\$ 40.00				\$ 40.00				
Baggage Fee (attach receipt)									
Other (attach receipt)									
<b>Day TOTAL:</b>	<b>\$ 76.80</b>	<b>\$ 20.00</b>	<b>\$ 20.00</b>	<b>\$ 20.00</b>	<b>\$ 76.80</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 213.60</b>	

Enter the number of miles driven on each travel day on this row. Mileage total auto-calculates

Enter expenses per itemized receipts collected during travel. Include receipts with the report. Day totals auto-calculate.

**Transport. and Other TOTAL**

<p>Other explanation:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>If "other" expenses are claimed, an explanation of the expense must be given in this box. Itemized receipt must be included.</p> </div>	<p>If a cash travel advance was received by the employee, the total of the advance must be entered.</p>
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**EXPENSE TOTAL** \$ 435.60

**CASH ADVANCE AMOUNT** \$ 319.20

**EXPENSE AMOUNT OWED** \$ **116.40**

total amount owed (either to the employee or back to RVCDS). If owed to the employee, the "amount owed" is the amount of the overnight travel expense claim in Paycom. If the employee owes RVCDS, the employee must repay RVCDS via check or money order.

By signing this document I certify that all reported expenses are accurate and true and that I have abided by all RVCDS travel policies and procedures.

**Employee** Jane Doe 11/9/2021  
*Signature Date*

Program Director adds expense coding for the travel.

**Review** SAS 11/10/2021  
*Initials Date*

**Program Director** Holly Wilson 11/11/2021  
*Approval Signature Date*

**Agency Approval** RV 11/12/2021  
*Initials Date*

Required Attachments if Applicable	<u>Expense Coding</u>						
	<u>GL #</u>	<u>Prog. Code</u>	<u>Job ID</u>	<u>Phase ID</u>	<u>Cost Code</u>	<u>%</u>	<u>TOTAL</u>
Itemized receipts as indicated above	70500	5072	22.5072	G13-ON Travel	208-R&R Staff	100%	\$ 116.40
							\$ -
							\$ -
							\$ -