

City of Hamilton Travel Authorization Form

Traveling From: <input type="text" value="2017-02-08"/>	through	<input type="text" value="2017-02-10"/>	Please note, these are the dates that you will be leaving and returning from the trip. These should include the travel days in addition to the class/conference/meeting dates.
Date of Departure		Date of Return	

Authorization is requested by: <input type="text" value="Dave Jones"/>		<input type="text" value="Finance"/>
Employee Name		Department
To attend (Course/Conference/Sponsor): <input type="text" value="Visit Hall County, GA Offices"/>		
Located at (City and State): <input type="text" value="Gainesville, GA"/>		
Registration Fee (Cost of Course/ Conference/Meeting)	Basic Fee: \$ <input type="text"/>	Other/Additional Fee: \$ <input type="text"/>

Business Justification for Travel

Observe ADP operation of time and attendance program in place at Hall County Offices

Transportation Expenses Check the appropriate boxes and record the estimated miles or cost for each mode of transportation to be used. For personal car, only estimated miles are necessary	<input checked="" type="checkbox"/> City Vehicle	Miles	Estimated Cost
	<input type="checkbox"/> Personal Car	<input type="text"/>	\$ <input type="text"/>
	<input type="checkbox"/> Airplane	N/A	\$ <input type="text"/>
	<input type="checkbox"/> Rental Car	N/A	\$ <input type="text"/>

Meal/Food Expenses Check the appropriate box; enter the number of days and the daily per diem amount. Per Diem rate table: <u>M&IE Per Diem Rates</u>	<input type="checkbox"/> In-town/Local	Cost Per Day	# of Days	Estimated Cost
	<input checked="" type="checkbox"/> Overnight	\$ <input type="text" value="69.00"/>	<input type="text" value="3"/>	\$ <input type="text" value="207.00"/>

Lodging Expenses	Hotel/Motel Name	Cost Per Night	# of Nights	Estimated Cost
	<input type="text" value="Holiday Inn Gainesville-Lanier Center"/>	\$ <input type="text" value="136.71"/>	<input type="text" value="2"/>	\$ <input type="text" value="273.42"/>

Miscellaneous Expenses Check the appropriate boxes and record the estimated cost for all applicable miscellaneous expenses.	<input type="checkbox"/> Parking Costs	Amount	<input type="checkbox"/> Tolls	Amount
	<input type="checkbox"/> Taxi Expenses	\$ <input type="text"/>	<input type="checkbox"/> Other	\$ <input type="text"/>

Account Number: <input type="text" value="100.12"/> <input type="text" value="120"/> <input type="text" value="640"/> <input type="text" value="550"/>	Total Estimated Cost: \$ <input type="text" value="480.42"/>
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Submit for Authorization <input type="button" value="Send Via Email"/>	For Department Head Use Only <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> </div> Approved by <input type="button" value="Send Approval"/>
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Form Type

Travel Request Form

City of Hamilton Travel Authorization Form

Traveling From: through
 Date of Departure Date of Return

Please note, these are the dates that you will be leaving and returning from the trip. These should include the travel days in addition to the class/conference/meeting dates.

Authorization is requested by:
 Employee Name Department

To attend (Course/Conference/Sponsor):

Located at (City and State):

Registration Fee Basic Fee: \$ Other/Additional Fee: \$
 (Cost of Course/
 Conference/Meeting)

Business Justification for Travel

Transportation Expenses

Check the appropriate boxes and record the estimated miles or cost for each mode of transportation to be used. For personal car, only estimated miles are necessary

	<input checked="" type="checkbox"/> City Vehicle	Miles	Estimated Cost
<input type="checkbox"/> Personal Car		<input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Airplane		N/A	\$ <input type="text"/>
<input type="checkbox"/> Rental Car		N/A	\$ <input type="text"/>

Meal/Food Expenses

Check the appropriate box; enter the number of days and the daily per diem amount. Per Diem rate table: [M&IE Per Diem Rates](#)

	Cost Per Day	# of Days	Estimated Cost
<input type="checkbox"/> In-town/Local	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input checked="" type="checkbox"/> Overnight	\$ <input type="text" value="69.00"/>	<input type="text" value="3"/>	\$ <input type="text" value="207.00"/>

Lodging Expenses

Hotel/Motel Name	Cost Per Night	# of Nights	Estimated Cost
<input type="text" value="Holiday Inn Gainesville-Lanier Center"/>	\$ <input type="text" value="136.71"/>	<input type="text" value="2"/>	\$ <input type="text" value="273.42"/>

Miscellaneous Expenses

Check the appropriate boxes and record the estimated cost for all applicable miscellaneous expenses.

	Amount		Amount
<input type="checkbox"/> Parking Costs	\$ <input type="text"/>	<input type="checkbox"/> Tolls	\$ <input type="text"/>
<input type="checkbox"/> Taxi Expenses	\$ <input type="text"/>	<input type="checkbox"/> Other	\$ <input type="text"/>

Account Number: Total Estimated Cost: \$

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Approved by

Approved

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Registration Fee (Cost of Course/Conference/Meeting) Basic Fee: \$ Other/Additional Fee: \$

Business Justification for Travel

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	City Vehicle	Miles	Estimated Cost
<input checked="" type="checkbox"/>	City Vehicle		
<input type="checkbox"/>	Personal Car	<input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/>	Airplane	N/A	\$ <input type="text"/>
<input type="checkbox"/>	Rental Car	N/A	\$ <input type="text"/>

Meal/Food Expenses

Check the appropriate box; enter the number of days and the daily per diem amount. Per Diem rate table: [M&IE Per Diem Rates](#)

	Cost Per Day	# of Days	Estimated Cost
<input type="checkbox"/>	In-town/Local	<input type="text"/>	\$ <input type="text"/>
<input checked="" type="checkbox"/>	Overnight	<input type="text" value="3"/>	\$ <input type="text" value="\$ 207.00"/>

Lodging Expenses

Hotel/Motel Name	Cost Per Night	# of Nights	Estimated Cost
<input type="text" value="Holiday Inn Gainesville-Lanier Center"/>	\$ <input type="text" value="\$ 136.71"/>	<input type="text" value="2"/>	\$ <input type="text" value="\$ 273.42"/>

Miscellaneous Expenses

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	Amount		Amount		
<input type="checkbox"/>	Parking Costs	\$ <input type="text"/>	<input type="checkbox"/>	Tolls	\$ <input type="text"/>
<input type="checkbox"/>	Taxi Expenses	\$ <input type="text"/>	<input type="checkbox"/>	Other	\$ <input type="text"/>

Account Number: Total Estimated Cost: \$

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	Miles	Estimated Cost
<input checked="" type="checkbox"/> City Vehicle		
<input type="checkbox"/> Personal Car	<input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Airplane	N/A	\$ <input type="text"/>
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Meal/Food Expenses

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Hotel/Motel Name	Cost Per Night	# of Nights	Estimated Cost
<input type="text" value="Holiday Inn Gainesville-Lanier Center"/>	\$ <input type="text" value="136.71"/>	<input type="text" value="2"/>	\$ <input type="text" value="273.42"/>

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<input type="checkbox"/> Taxi Expenses	\$ <input type="text"/>	<input type="checkbox"/> Other	\$ <input type="text"/>

Account Number: Total Estimated Cost: \$

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Approved by

Approved

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	Amount		Amount
<input type="checkbox"/> Parking Costs	\$ <input type="text"/>	<input type="checkbox"/> Tolls	\$ <input type="text"/>
<input type="checkbox"/> Taxi Expenses	\$ <input type="text"/>	<input type="checkbox"/> Other	\$ <input type="text"/>

Account Number: **Total Estimated Cost:** \$

Submit for Authorization	For Department Head Use Only
<input type="button" value="Send Via Email"/>	<input checked="" type="checkbox"/> Approved <input type="button" value="Send Approval"/>
	Approved by 1/31/17